

**ROINN** *Army Pensions Board*

F. C. 1.  
 F6-Roinn.  
 Tá annso, leis,  
 1310

NÁ CUIRTEAR ÉANTUAIRISC AR AN GCLÚDACH SO.

An Uimhir.

An Gnó.

52/APB/395

*barty m<sup>r</sup> rora,*

*(Godfrey barty)*

An Uimhir ag Roinn Eile.

*Scraban,  
 bunniskeane,  
 Co. Cork.*

DP 558

Do cuireadh chun	Dáta.	Do cuireadh chun	Dáta.	Do cuireadh chun	Dáta.
<i>See list</i>	<i>24/55</i>				
<i>B. F.</i>	<i>18/4/55</i>				
<i>B. F.</i>	<i>9/5/55</i>				
<i>See</i>	<i>23/6/55</i>				
<i>PA</i>	<i>12/7</i>				

ARMY PENSIONS ACT, 1932.

REPORT BY THE ARMY PENSIONS BOARD ON AN APPLICATION FOR AN ALLOWANCE OR GRATUITY UNDER SECTION 12 OF THE ARMY PENSIONS ACT, 1932, IN RESPECT OF A PERSON KILLED WHILE ENGAGED IN MILITARY SERVICE.

Ref. No. ....

Ref. No. *52/218/395*

To the Army Pensions Board.

To the Minister for Defence.

I am directed by the Minister for Defence to transmit the accompanying application for investigation and report in accordance with the Army Pensions Board (Investigation of Applications under Part II of the Army Pensions Act, 1932) Regulations, 1933. The relevant service certificate is also sent herewith. The report should take the form of replies to the questions set out herewith.

The following members of the Army Pensions Board attended:—

*Mr John McCloy*

*Dr. E. O'Sullivan*

*Majr D.J. Doyle*

*J. J. Horgan*

The report of the Board is as follows:—

(Where the findings of the Board are not unanimous, separate reports signed by the individual members of the Board should be furnished.)

Date *18 May 34*

Application of *Mrs Nora Banty*

Signed *John McCloy*  
Chairman of the Board.

*Scraban, Benniskeane Co. Cork.*

Date *2 July 1934*

in respect of the death of *her son*

*Godfrey Banty,*  
killed while engaged in military service.

1. What was the nature of the dependency of the applicant?

*Partial*

2. Were there any persons other than the applicant dependant on the deceased? If so, state names and addresses and nature of dependency.

*Yes. applicant's husband - partial*  
*The board having considered this case found that the applicant & her husband were partially dependant on the deceased, having regard to the special circumstances in the case known as the a grant of 1/2 (half) (Mrs Banty) be awarded.*

A.P.B.7.

Serial No. \_\_\_\_\_

Ref. No. S.A./ 52/A.P.B./395

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Miss Mary banty  
Sarah Ann Keane  
Co. Cork

D.P. 588

7.3

Finance Officer.

The Board recommend that Dr. F. B. McEvoy

6, Sidney Place Cork

be appointed Pensions Medical Officer for the purpose of examination and report on the above case.

In addition to the completion of Form A.P.37A, the following tests are required please :-

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Where the Clinical Examination reveals the presence of a permanent pathological condition which of itself renders the applicant incapable of self-support by reason of permanent infirmity, it will not be necessary to proceed with the pathological tests recommended by the Board at \_\_\_\_\_ as aids to the diagnosis.

*Amount to be paid Permanently Invalid's*

RÚNAI, BÓRD NA NARM PHINSEAN.

DÁTA 21/3/55

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MH.



Roinn Copanta  
Fáisce  
21 JUN 1955  
Clárú na Spairne  
AIRGEAD 15.

A.P. 37A. *Eaf 2/6.*

Reference No. *DP588*

MEDICAL REPORT ON *Miss Mary Carthy*

Name *Miss Mary Carthy*

Home Address *SCRAHAN, ENNISKEANE, CO. CORK*

Age last Birthday *64*

Former trade or occupation *Home work*

Present trade or occupation *Home work*

*Date of examination 17 June 1955.*

State here the applicant's Medical History as it relates to his/her present condition:

*She states she felt shocked and depressed following the death of her brother - lost interest in general events and has not felt the same since.*

*She had a uterine operation 19 years ago. For past two years has felt debilitated and mildly depressed with some nervous symptoms. c.f. attached letter.*

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REPORT OF AN APPLICANT CLAIMING TO BE INCAPABLE OF SELF-SUPPORT BY REASON OF BODILY OR MENTAL INFIRMITY.

NOTES:

1. Clinical examination should include report on Pulse, Temperature, Respirations, Blood Pressure, Urinalysis and, if possible, Weight.
2. In case of disablement due to injury or disease the effect on function should be clearly stated.

1. Clinical examination:—

(a) Symptoms. She was vague, self centered and hypochondriacal. She complained of general weakness, pain both sides of chest and insomnia following certain days when she was apprehensive and irritable. At times she feels depressed & says she feels "down and out", lacking in courage and afraid to be seen by her neighbours.  
Complains of giddiness on rising in the morning

(b) Physical Signs. Complexion pale, features lined and pre senile appearance. Heart beat forceful - Pulse 132 per min. she appears to have a little precordial pain at times. She is somewhat hypertensive B.P. being 190/110. K.J. upper ++, lower ++. Varicose veins right leg - wears an elastic stocking. Weight 11 Stone 6 1/2 lbs. She could not cooperate in specific mental tests - given. Careless, somewhat unhygienic & hair matted.

(c) Diagnosis.

Hypochondriasis with depressive features and some Hypertension - mild -

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2. In the case of an amputated limb the following particulars will be entered:—

- |  |       |       |     |
|--|-------|-------|-----|
| (a) Limb affected                              | ..... | ..... | (a) |
| (b) Site of amputation                         | ..... | ..... | (b) |
| (c) Measurement of stump                       | ..... | ..... | (c) |
| (d) How long is stump soundly healed?          | ..... | ..... | (d) |
| (e) Is patient fitted with an artificial limb? | ..... | ..... | (e) |

3. Report of X-Ray Examination. Film, where available, to be attached .....

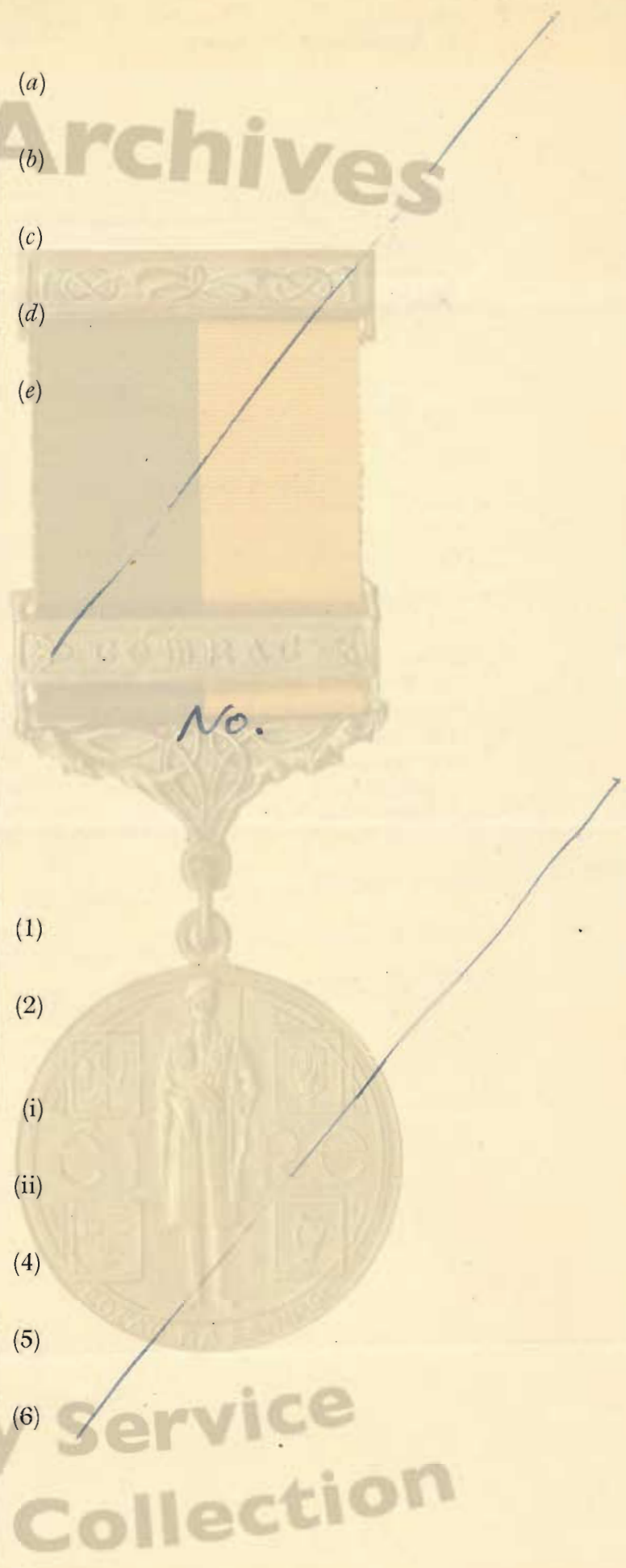
4. Report of Oculist, Pathologist or other Specialist to be attached .....

X 5. Will treatment of any disability or disabilities found render applicant capable of earning his living? .....

6. In the case of a nerve injury the following particulars will be required:—

- |                                 |       |       |      |
|---------------------------------|-------|-------|------|
| (1) Nerve involved              | ..... | ..... | (1)  |
| (2) Muscles affected            | ..... | ..... | (2)  |
| (3) Area of loss of sensation:— |       |       | (i)  |
| (i) to pinprick                 | ..... | ..... | (ii) |
| (ii) to cotton wool             | ..... | ..... | (4)  |
| (4) Reaction to faradism        | ..... | ..... | (5)  |
| (5) Reaction to galvanism       | ..... | ..... | (6)  |
| (6) Is R.D. present?            | ..... | ..... |      |

165. Indicate on charts (and attach) where possible the site and extent of the injury.



ASSESSMENT.

7. What is the degree (in words and figures) of Applicant's disablement? .....

Eighty per cent (80%)

8. State if Applicant is incapable of self-support by reason of permanent infirmity of body or mind, stating nature of such permanent infirmity .....

she can do some light house work but is unfit for any gainful occupation

Permanently invalided.

yes.

9. If the degree of disablement as set out at 7 above be less than 100% (one hundred per cent.) and yet you consider the applicant incapable of self support by reasons of permanent infirmity of mind or body, state the reasons for your conclusion .....

Generally dull and inadequate due to presenile traits and advancing age (64). She has a measure of Hypertension and Hypochondriasis

Signature

Fergus B. M. Eoy. M.B., D.P.M.  
6 Sidney Place  
Cork

Date

17 June 1955

Army Pensions Board.  
Pensions Medical Officer.

1953  
~~made the~~ ARMY PENSIONS ACT, 1943/53.

REPORT ON A CLAIM FOR SPECIAL ALLOWANCE.

Ref. No. ~~S.A.~~ 52/APB/395.

To the Minister for Defence.

The following Members of the Army Pensions Board attended :-

Mr. M. MacMurnaigh,

Dr. É. Ó Hógáin,

Comdt. J.J. Breen.

Claim of Jos. E. Finlayson, D.P. 588

The Board having considered the report furnished by

Dr. Jos. B. M. Quoy

who was appointed Pensions Medical Officer for the purpose of examination and report on the above-named, are satisfied that ~~he/she is incapable of self-support by reason of permanent infirmity, and that he/she was so incapable of self-support on the date of examination, viz.~~ permanently incapacitated.

M. MAC MURNAIGH

CATHAOIRLEACE AN BHÚIRD.

DÁTA

28.6.51

MH.

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# Military Archives

## REPORT ON A CLAIM UNDER THE ARMY PENSIONS ACT, 1953.

Reference No: 52/APB/395.

To the Minister for Defence.

The following Members of the Army Pensions Board  
attended:-

Mr. M. Murney.

Dr. E. O Hogain.

Comdt. J.J. Breen.

Claim of: Miss Mary Canty - D.P. 588.

The Board having considered the report furnished by

Dr. Fergus B. McEvoy, Cork,

who was appointed Pensions Medical Officer for the purpose of  
examination and report on the above-named, are satisfied  
that she is permanently invalided.

M. MAC MURNAIGH

CHAIRMAN OF THE BOARD.

DATE: 28./6/ 1955.

GMcG.

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# REPORT BY THE ARMY PENSIONS BOARD ON A CLAIM UNDER THE ARMY PENSIONS ACTS.

Name of Applicant..... *Miss Mary Canty*

Relationship ..... *Sister*

Name of Deceased..... *Geoffrey Canty*

Board Reports:—

Injury/Wounded/Disease..... *Incapable of*

*domestically available*

Attributability.....

Other remarks..... *Letter from by the husband's wife*

*W. B. G. 1914*

Signed..... *W. Macbr.* Chairman.

*G. Hogan*  
*J. M. M.* } Members.

Date..... *28/6/53*