NOTICE OF INJURY SUSTAINED WHILE ON DUTY

Send original and one copy to Parkland Memorial Hospital 5201 Harry Hines Blvd. Telephone LO-7611

Director of Public Health

TO BE FILLED IN BY IMMED								
Name of injured employee	John D.	Tippit						
Address 1919	Glennfield		Sex	M	Age	32	Race	W
Dept. Police		Div. Pat:	rol	c	lassificatio	n Pat	rolman	ı ı
Date of accident Apr								
			I	ime) PM (
Location 1131 N								
Describe in full how accidence of the Control of th	ppit vi site	lement to d Dr. Ma	o origin ttson No	al rej v. 5,	port) 1956.	X-Ra	ıys	
	that approx							
embedded i	n his right	knee ca	p.	,				
Name witnesses							 -	
Disposition of case <u>Entel</u>	ed Methodis	t Hosp.	NOV. 15,	1956	for o	perati	.on	
					Signate	re of superi	ler .	
Hospital to release any and request.	an information regu	roing mis oisgi	only to the Pe	rsonnei D	·	• • •		s upon me
TO BE FILLED IN BY PARKLAND HOSPITAL:				Signature of injured employee				
Authorization of emergency	•							
Date entered Emergency	Methodist	11-15-5	5Time	•			AM () PM (
Examination and treatment	administered by Do	torMat	tson					
Extent of injury Ice								
Disposition of case (peration fo	r remova	l of ice	-pick				
70 PF EILIPE IN DV 00040		A. 454						
First date off duty	[anxx 1 4x 19 55	311-0-70	_Date back (on duty	Jan.	17, 1	.95 7	
Payment of salary amounti	ng to \$179.5	50 fo	r period from	n1-:	1-57	to.	1-	17-57
involving16	working d	ays due to this	injury. Expens	e charge	able to A	12	F-13	
Approved:	to faces	on					<u>d)</u>	٠
Dope	rtment Head			<u> </u>	Perso	nei Directe	PR.	
The above described injury	under normal circum	stances will ne	cessitate a to	tal of				absenc
from the job. This file should	he returned for my	further ottention						
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