

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

Pension Claim No. 49335

Name and rank of claimant.

Increase Henry Bell, Rank, Private

Company G, 4th U.S.C.T. Baltimore, State Md

Claimant's post office address.

424 Lewis St Baltimore, January 10, 1890

(Date of examination)

We hereby certify that in compliance with the requirements of the law\* we have carefully examined this applicant, who states that he is suffering from the following disability, incurred in the service, viz:

Cause of disability.

G.S.W. left hand and results.

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of Eight (8) dollars per month.

Pulse rate per minute, 84; respiration, 18; temperature, 98.6; height, 6 feet; weight, 170 pounds; age, 45 years.

Here give the claimant's statement as briefly and as compactly as possible.

He makes the following statement upon which he bases his claim for increase. Cannot use left hand in performance of manual labor on account of stiffness of the parts and limited motion of middle and ring fingers.

Here give a full symptom picture of the case, embracing all the physical and rational signs, but confining it to the present condition of the claimant.

It must be borne in mind that the duty of the Surgeon is to give an opinion as to the proportionate degree of disability, as to the grades, without any regard to dollars and cents, and to make such a full particular description as will afford to this Office the ground for intelligent opinion and action in rating.

Upon examination we find the following objective conditions. General physical condition fair. Scar of G.S.W. result of being struck by fragment of shell on dorsum of left hand. Scar is 3 inches in length. The upper portion which is over the center of 3rd metacarpal bone is irregular triangular in general outline with base upwards. 1 1/2 inches long. one inch wide at base. with a linear scar running from apex along the side of knuckle and radial surface of ring finger ending opposite the proximal joint. Scar is adherent dragging very sensitive. linear portion depressed. the triangular portion slightly elevated. There was evidently extensive comminution of proximal phalanx of ring finger with some loss of bone. with splinting of 4th metacarpal and perhaps some injury to 3rd metacarpal bone.

From the existing condition and the history of this claimant, as stated by himself, it is, in our judgment, probable that the disability was incurred in the service as he claims, and that it has not been prolonged or aggravated by vicious habits. He is, in our opinion, entitled to a rating for the disability caused by G.S.W. Left hand for that caused by

Rate for each cause of disability. If prolonged by vicious habits, the word not should be erased and the reason for the change given.

12/18 rating for the disability caused by G.S.W. Left hand for that caused by

\* See the back.

† Here state whether for original, increase, restoration, or renewal, or for a re-rating.

A. A. White, Pres. C. S. L. Sec'y. Geo R. Graham, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.