

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.

Original

Pension Claim No. 704290

Name and rank of claimant.

Thomas Carter

Rank, Corporal

Company B, 30th Reg't U.S.C.V. Baltimore State Md

Claimant's post office address.

121 Arch St. Balto Md

(Post office address of the Board.)

July 10, 1889

(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.

Pleuro-Rheumatism and partial blindness

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

and that he receives a pension of 0 dollars per month.

Pulse rate per minute, 76; respiration, 18; temperature, 100; height, 5 feet 4 1/2 inches; weight, 136 pounds; age, 44 years.

He makes the following statement upon which he bases his claim for † Original

that his disability interferes with the performance of manual labor

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

Upon examination we find the following objective conditions:

General physical appearance good
Crepitation in all the large joints
No deformity of joints - Heart normal
Lungs normal No evidences of pleurisy
Eyes Vision is perfectly normal at present
He says he has entirely recovered from his eye trouble
No other disability

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 total, &c., through 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.

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 6/8 rating for the disability caused by Rheumatism for that caused by _____, and _____ caused by _____

Rate for each cause of disability.

If prolonged by vicious habits, the word not should be erased and the reason for the erasure given.

* See the back.

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

A. A. Hute, Pres. E. S. ... Sec'y. Geo R ... Treas.

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