

(3-111.)

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, &c.

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. 1022022

[State above whether for original, increase, or restoration.]

Name and rank of claimant.

WILLIAM KELL

Rank, PRIVATE

Claimant's post-office address.

Company G, 10th Reg't U.S.C.

BALTIMORE, MD.

State,

625 SARAH ANN ST., BALTO. MD.

[Post-office address of the Board.]

AUGUST 23th

, 189 1

[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

Cause of disability.

in the service, viz: Scurvy, Injury to Breast, Bone Fever, Injury two fingers of left hand.

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

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

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

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

[Original, increase, restoration, &c.]

Suffered with scurvy of both legs below the knee. Has much pain in the legs as result.

Received injury of chest by being struck with piece of timber.

Had bone fever while in service.

Injured two fingers of left hand while handling timber.

Upon examination we find the following objective conditions: Pulse rate, 34; respiration, 13; temperature, N; height, 5 feet 8 inches; weight, 152 pounds; age, 42 years. General physical condition fair.

Here give a full description of the disabilities, in accordance with Book of Instructions.

Has numerous scurvy spots scattered over both legs below the knees. They vary from 1/3 to one inch in diameter. Have characteristic appearance. They are whitish; some are adherent and sensitive. Complains of pain while walking or standing for any length of time.

No evidence of injury of breast.

There is slight stiffness of ring and little fingers of left hand, which he claims to be result of having hand caught under piece of timber. There is no interference with the closure of the hand and grasp is normal. No disability from this cause.

No evidence of results of "Bone fever", or malaria poisoning. Liver and spleen normal.

Rectum: Speculum shows one large internal hemorrhoid 1/2 inch in diameter, has an irritated appearance and sensitive. No disposition to bleed. He states that it protrudes at each stool, which is probably the case. Some congestion of the mucous membrane with enlargement of hemorrhoidal veins.

Heart and Lungs are normal.

No other disability exists.

Rate for EACH cause of disability.

He is, in our opinion, entitled to a 4/18 rating for the disability caused by Scurvy etc. for that caused by

Hemorrhoids, and 6/18 for that caused by

A. White, Pres. Sec'y. Geo R. Halsey, Treas.

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