

ORIGINAL FOR SPECIAL EXAMINER.

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used wherever 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.

Increase
 Name and rank of claimant: James Arnstead, Rank, Sgt.
 Company I, 39th Reg't USC Inf. Baltimore, Md State,
 Claimant's post office address: 713 W. German St. Balto | May 10th, 1895
 Pension Claim No. 664,927
 (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: Rheumatism, chills + fever - malarial poisoning - piles disease of eyes - dyspepsia - heart disease - kidney disease

If a pensioner, fill in the amount; if not, erase the whole line.
 and that he receives a pension of Six dollars per month.
 Pulse rate per minute, 75; respiration 22; temperature, 98; height, 5 feet 7 inches; weight, 155 pounds; age, 34 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
that he has rheumatism of the left side. He is
bothered with chills every fall of the year. He
is not bothered much with piles at present. He
has disease of eyes - dyspepsia - heart and kidney
disease

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.
 Upon examination we find the following objective conditions: Rheumatism. There
is rheumatic soreness over the left shoulder & hip
joints without atrophy or swelling of muscles or en-
largement of joints. There is no crepitation of
shoulder joint and but slight crepitation in hip
without contraction in either. There is
slight stiffness of the hip joint & there is some
pain without limp upon motion. Rated at 2/16
chills + fever. There are no objective symptoms of
chills or fever or malarial poisoning of any type.
Piles - There are no objective symptoms of piles
disease of eyes - The lids are normal - pupils are
of natural size & the right responds to light & shade
the left pupil does not readily respond. The left
cornea is slightly opaque. No complications. Vis-
ion - Both eyes $\frac{20}{20}$ - right eye $\frac{20}{20}$ - left eye $\frac{20}{100}$.
Rated at 4/16
dyspepsia. The tongue is furled - the skin normal

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

Rate for each cause of disability.
 If prolonged by vicious habits, the word not should be erased and the reason for the erasure given.
 rating for the disability caused by _____, _____ for that caused by _____, and _____ caused by _____

* See the back.
 Here state whether for original, increase, restoration, or renewal, or for a re-rating
A. G. Jayson, Pres. W. J. Garrett, Sec'y. D. C. Island, Treas.