REPRODUCED AT THE NATIONAL ARCHIVES.

(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.

INCREASE Pension Claim No. 484777

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

Name and rank of claimant.

JAMES HENSON, Rank, PRIVATE

Company H, 19th Reg't U.S.C.T. BALTIMORE MD. State,

Claimant's post-Office address. #26 E. FAYETTE ST. BALTO.MD.

[Post-office address of the Board.]

NOVEMBER 19th., 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

Cause of disability.

in the service, viz: Disease of Stomach and resulting Disease of Liver and Paralysis.

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

and that he receives a pension of $12.00. dollars per month.

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

[Original, increase, restoration, &c.]

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

Suffers with pain in region of stomach and liver with vomiting. Constant eructations and can eat nothing but light food. Six years ago had paralysis of left side and has never recovered Face is drawn and he cannot speak plainly and saliva runs from the mouth. Has also attacks of Epilepsy, falling in the street. Cannot perform any manual labor whatever. since being paralyzed.

Upon examination we find the following objective conditions: Pulse rate, 72; respiration, 17; temperature, N; height, 5 feet 7 inches; weight, 138 pounds; age, 50 years. General physical condition is bad. Emaciated and feeble. Conjunctivae slightly tinged yellow. Tongue coated yellow and fissured. Epigastrium retracted. Liver is somewhat enlarged and slightly sensitive. Tenderness in the epigastric region. Rectum is somewhat congested and vessels are engorged but there are no hemorrhoids. The disease of stomach and liver which he claims is an old Chronic Dyspepsia. General intelligence and mental condition is not good. Rather stupid and does not seem to comprehend the questions asked him. Memory is defective. Forgets the names of places dates and objects. Could not remember the name of street on which he lived without reference to a paper in his pocket. Heart: Apex is downward and in fifth interspace. Action is very irregular and intermits at times. There ia a slight mitral regurgitant murmur. Special senses are in fair condition for age. Has evidently had a left hemiplegia. Muscles of face and mouth are drawn to the right. Face has a rather vacant appearance. Constant dribbling of saliva from left side of mouth. Tongue is deflected somewhat to the right and slightly tremulous Anaesthesia, but not complete, of whole left leg and hip. Gait is unsteady and with eyes closed he bears off to the left. Slight tremor of all the extremities. Left patellar reflex is absent. No evidence of disease of spinal cord. This man in his present condition could not perform any manual labor. We would recommend an increase.

Here give a full description of the disabilities, in accordance with pars. 5, 6, 51, 52, &c., of Book of Instructions for 1889

Rate for *EACH* cause of disability.

No other disability. He is, in our opinion, entitled to a 8/18 rating for the disability caused by Disease of Stomach & Liver that caused by ——, and 3" Grade for that caused by Left Hemiplegia & results

H. A. White, Pres. C. Landrys, Sec'y. Geo R Graham, Treas.

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

(632—150 M.) 6—552

117