

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. 168400

Name and rank of claimant.

George W. Downs

Rank, Private

Claimant's post-office address.

Company E. 30th Reg't U.S.C.T. Baltimore State Md.

507 Jasper St. Baltimore, January 29th 1890.

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: G.S.W. of left knee.

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

and that he receives a pension of Two (2) dollars per month.

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

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

Claims to have pain in knee at night and when walking. Interferes with the performance of manual labor.

Upon examination we find the following objective conditions: Pulse rate, 96; respiration, 19; temperature, 98.6; height, 5 feet 7 inches; weight, 185 pounds; age, 49 years. General physical condition good.

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

Ball entered outer aspect of left knee just behind the tuberosity of tibia over outer hamstring tendon passing downward and backward emerging on posterior and inner aspect of leg about one inch to inside of center of belly of gastrocnemius and 6 inches from point of entrance. Scar of entrance 3/4 inch in diameter - slightly depressed - nonadherent - sensitive. Scar of exit - same size - depressed - slightly adherent and dragging - sensitive. No limitation of motion of knee joint. Claims that he has pain when walking and in damp weather. No other disability.

Rate for EACH cause of disability.

He is, in our opinion, entitled to a rating for the disability caused by G.S.W. of left knee for that caused by 6/18, and for that caused by

A. H. White, Pres. E. S. Clouly, Sec'y. Geo. R. Baham, Treas.

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