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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. 528713  
[State above whether for original, increase, or restoration.]

Name and rank of claimant. John Wesley, Rank, Private

Company E: 89 Regt U.S.A. Baltimore State, and  
[Post-office address of the Board.]

Claimant's post-office address. 1305 Baltimore Ave June 18, 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: Rheumatism - Disease of head and heart

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  
[Original, increase, restoration, &c.]

Here give the claimant's statement as briefly and as compactly as possible. Claims rheumatism in both knees and hands. At times has difficulty in moving about. Claims not to be able to grasp with hands on account of stiffness of fingers. Vertigo when working in the sun with much dust heavy headache

Upon examination we find the following objective conditions: Pulse rate, 72; respiration, 17; temperature, N; height, 5 feet 6 inches; weight, 180 pounds; age, 60 years. General physical condition good

Here give a full description of the disabilities, in accordance with pars. 5, 6, 51, 52, &c., of Book of Instructions for 1889. No crepitation or deformity in joints. Has pain on motion in both knees and complains of pain in the fingers. Heart a few beats normal. Prolongation of first sound with some roughness but no insufficiency.

He probably suffers with Rheumatism in bad weather although he has but little evidence of it at present. No evidence whatever of disease of head other than his statement above. No other disability

Rate for EACH cause of disability. He is, in our opinion, entitled to a 4/18 rating for the disability caused by Rheumatism 0 for that caused by Disease of heart and 0 for that caused by Disease of head

A. A. White, Pres. E. Slougen, Sec'y. Geo R Lahan Treas.

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