

These special instructions you will read in certificate.

B. A. [Signature]

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Insert character and number of claim. Additional Army Pension Claim No. 5119  
 [State above whether for original, increase, or restoration]  
 Name and rank of claimant. John Wesley, Rank, Private  
 Company B. 39 Reg't W. S. Inf. Baltimore Md. State,  
 Claimant's post-office address. 1305 Bunt St. Balto Md. [Post-office address of the Board]  
June 7, 1893 [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 - neuralgia - vertigo - disease of eyes - heart-respiration - digestive organs - liver - kidneys - testis.  
 and that he receives a pension of \$ 10.00 dollars per month.

If a pensioner, fill in the amount; if not, erase the whole line.  
 He makes the following statement upon which he bases his claim for Additional [Original, increase, restoration, &c.]  
Rheumatism - came on during the service  
Paralysis came on in Sept. or Oct. 1892

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

Upon examination we find the following objective conditions: Pulse rate, 66; respiration, 23; temperature, 97; height, 5 feet 6 inches; weight, 159 pounds; age, 63 years.

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

Rheumatism. - The right shoulder is affected - he cannot raise the right arm to a horizontal position - the right arm at biceps measures  $9\frac{1}{8}$  and the other  $12\frac{1}{2}$  inches - the right knee measures  $1\frac{1}{4}$  inches more than left in circumference - the muscles are thickened and stiff and ligaments contracted - the right leg is oedematous - the right ankle is enlarged by thickened muscles and oedema, it measures  $\frac{3}{4}$  of an inch greater than fellow - prehensile power in the right arm is almost totally absent - the fingers in right hand are permanently flexed and contracted, the arm hangs at the side cold and limp almost without power.

The actual and probable origin of every existing disability must be fully set forth. Whenever a disability is shown, or is believed to be due to or aggravated by vicious habits the opinion of the board must be stated. Were not due to such habits this fact must be stated.

Neuralgia and vertigo. - Both of these are present, but I believe them to be consequent upon the cerebral disturbance that causes the Paralysis.

Disease of eyes. The right eye is so defective that he cannot count fingers at 10 ft - the left eye is normal for a man of his age - the pupil of right eye is permanently dilated  $3\frac{1}{2}\%$  very little response to light.

Rate for EACH cause of disability.

He is, in our opinion, entitled to a rating for the disability caused by \_\_\_\_\_, for that caused by \_\_\_\_\_, and \_\_\_\_\_ for that caused by \_\_\_\_\_ (over)

\_\_\_\_\_, Pres. \_\_\_\_\_, Sec'y. G. Lane Tammill, Treas.

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

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