

# SURGEON'S CERTIFICATE.

Insert character and number of claim.

Increase

Pension Claim No. 172 780

Name of claimant.

James BOON.

Address of Board.

Baltimore, P. O.  
Maryland, State.

Claimant's post-office address.

Private Company C, 39, Reg't U.S.C. Inf.  
#224 W. York St., Balto., Md.

November 3, 1900  
[Date of examination.]

Cause of disability.

Gunshot wound of right thigh, disease of back, kidneys, deafness, eyes, piles, dyspepsia, lungs, chronic rheumatism, fistula, neuralgia, general debility. He receives a pension of Ten dollars per month.

Here give the claimant's statement (as briefly and as compactly as possible) in regard to the origin of his disabilities and the manner in which they affect him.

He makes the following statement upon which he bases his claim for Increase Pension [Original, increase, restoration, etc.]

"Received gunshot wound and contracted disease of back while in service. Not able to perform manual labor on account of gunshot wound." Laborer.

Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, which should be used to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

We hereby certify that upon examination we find the following objective conditions:

Pulse rate, 78, 84, 90, respiration, 18, 26, 30, temperature, 98  
[Sitting, standing, after exercise.] [Sitting, standing, after exercise.]

height, 5 feet 4 inches; actual weight, 120 pounds; age, 60 years.

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

Gunshot Wound. Scar of entrance on anterior aspect of the right thigh, three inches below the apex of Scarpa's triangle, 1/2 inch in diameter; depressed, adherent, dragging and sensitive. The missile penetrated through the muscles back of the femur downward and outward and emerged on the outer aspect of the thigh three inches above the knee joint. The scar of exit is 1/2 inch in diameter; depressed, adherent, dragging and sensitive. The wound causes weakness of the thigh, and pain in walking.

The actual or 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. When not due to such habits this fact must be stated.

Back; Rheumatism. Has crepitation in all large joints with pain on motion. No deformity or limitation of motion of joints. His lumbar muscles are atrophied 20%, sore to touch and very painful in stooping and rising. Heart normal in size, position and function. No hypertrophy or dilatation. No dyspnea, cyanosis or oedema.

Each disability must be rated separately, the act of Congress of March 2, 1895, requiring "that the report of such examining surgeons shall specifically state the rating which, in their judgment, the applicant is entitled to."

Kidneys. No local oedemas or dropsies. No anaemia, uraemia or degenerations. Urine pale. S. G. 1020. Acid. No albumen or sugar.

Dyspepsia. All digestive organs normal in size and function. No abdominal soreness. Rectum normal. Is in good physical condition.

Deafness. Each external and internal auditory apparatus in normal condition. Can hear with each ear ordinary conversation at a greater distance than six feet.

When rates are recommended solely on subjective evidence the strongest reasons must be given therefor.

Eyes. External and internal structures each eye normal. Cannot read, but can count fingers at twenty feet.

Piles; Fistula. Rectal mucous membrane normal. No piles. No fissure, fistula, stricture or prolapse.

Lungs. No cough. No dullness on percussion. Respiratory sounds clear. Chest measures, expiration 32, rest 33, inspiration 34.

No symptoms of Neuralgia. No General Debility

A. A. White, Pres. Leo R. Baker, Sec'y. G. Lane, Treas.

N. B.—Do not use backs of certificates for any purpose other than indicated by printed matter thereon. When additional space is needed to complete report of examination use blank certificate (3-111 g) properly numbered, and attach it to the back and upper margin of this sheet. Marginal entries must never be made.