

(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, etc.

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.

Name and rank of claimant.

Claimant's post office address.

Pension Claim No.

Rank,

Company

Reg't

U.S. C. I.

(Post office address of the Board.)

State,

(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 in the service, viz:

Cause of disability.

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

and that he receives a pension of

dollars per month.

Pulse rate per minute,

respiration,

temperature,

height,

feet

inches; weight,

pounds; age,

years.

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

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

Here give a full symptom picture of the case, embracing all the physical and rational signs, but confining it to the present condition of the claimant.

It must be borne in mind that the duty of the Surgeon is to give an opinion as to the proportionate degree of disability, as to total, &c., through the grades, without any regard to dollars and cents, and to make such a full particular description as will afford to this Office the ground for intelligent opinion and action in rating.

Upon examination we find the following objective conditions:

General appearance fairly healthy for one of his age. Thoracic and abdominal vesicular sound. There is a stellate shaped scar, size of nickel, depressed slightly, adherent to underlying soft parts, non sensitive, situated on anterior aspect of forearm, over lower 1/3 of radius. Another circular scar, size of dime, non depressed, non adherent, non sensitive, situated on outer aspect of forearm about junction of middle and lower 1/3 of radius. There is a fan shaped scar on left side of abdomen, about 3 inches to left of pit of stomach, non depressed, non adherent, non sensitive, about 2 inches long & 1/2 inch wide at greatest expansion. Another linear scar, slightly depressed, adherent to underlying soft parts, non sensitive, size, 1 inch long, 1/4 inch wide, situated to right of median line, about 1 1/2 inches below pit of abdomen. This scar was made by surgeon's knife in extracting bullet. There is no impairment of motions of wrist joint being normal in all respects. 2/8 total not been prolonged or aggravated by vicious habits. He is, in our opinion, entitled to a rating for the disability caused by S. S. W. of left wrist & 2/8 for that caused by S. S. W. of abdomen, and caused by

Rate for each cause of disability. If prolonged by vicious habits, the word not should be erased and the reason for the erasure given.

* See the back.

† Here state whether for original, increase, restoration, or renewal, or for a re-rating.

J. C. Coffman, Pres. S. R. Munnick, Sec'y. N. B.—Always forward a certificate of examination whether a disability is found to exist or not.