

CERTIFICATE OF MEDICAL EXAMINATION.

Insert character and number of claim.

Increase Pension Claim No. 10,248,261

Name of claimant.

Benjamin Welsh

Address of Board.

13 Baltimore Md P.O. State.

Claimant's post-office address.

Company B Reg't 19, US C Inf 934 Pierce St Balto Md

May 28, 1921 [Date of examination.]

Names of disabilities.

Gun shot wound, Trophical Condition of legs - feebleness

He receives a pension of 50 dollars per month.

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

He makes the following statement in regard to the origin of his disabilities and date when first discovered by him: I have not been out of the house for nearly a year, I am lame. Can't walk, am feeble, my limbs feel so heavy.

Birthplace, Baltimore; age, 77 years; height, 4.10; weight, 120 pounds; complexion, Black; color of eyes, Brown; color of hair, Gray; occupation, none; permanent marks and scars other than those described below, none

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

Pulse rate, 70, 72, 90; respiration, 16; temperature, 98

Here give a full description of the disabilities, in accordance with Book of instructions, and make a separate paragraph for each disability.

His heart when quiet appears normal - upon effort quite accelerated. Lungs in good condition. Kidneys urine alkaline color acid sp gr 1.021. But despite the fair condition of these organs his legs are greatly swollen the left one especially so.

Facts within the knowledge of the Board, or any member thereof, relative to the cause of any disability found should be stated.

He was wounded at Petersburg; the bullet entered on the right leg at outer side of the femur at its middle - made its exit on the underside downward a little toward the patella. Muscles were impaired and show shrinkage & tearing. He has always been lame from it.

Act June 6-20, Survivors Spanish War: Estimate incapacity from all causes not due to vicious habits at one-fourth, one-half, three-fourths, or total.

This claimant can only move clumsily about his room by the use of crutches. He is feeble and spends much time in bed. He says he can dress himself, but gives him much trouble and pain to do so. This applicant requires the regular aid and attention of another person. I find no evidence of previous vicious habits.

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.

§72 Cases: In every instance where aid and attendance is alleged, the Board will state (in so many words) whether the regular aid and attendance of another person is or is not required.

I find this claimant to be debilitated and feeble by reason of the above described condition and to entitle him to a pension of 72 dollars a month.

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

Pres. E. M. Dodson Sec'y. Treas.

Single surgeons will use this blank, changing "we" to read "I."

Marginal entries must never be made.