

SURGEON'S CERTIFICATE.

Insert character and number of claim.

Increase

Pension Claim No. 592,886

Name of claimant.

Perry Dixon

Baltimore,

P. O.

Pvt. Company H. 30 Reg't U.S.C.I.

Address of Board.

Maryland.

State.

Claimant's post-office address.

1843 Lasmon street,

October 19th, 1900

[Date of examination.]

Cause of disability.

Rheumatism, disease of heart, breast, back, chest, kidneys, eyes, diarrhoea, piles, general debility, disease of rectum and nervous affection and throat.

He receives a pension of 8 dollars per month.

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

[Original, increase, restoration, etc.]

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 has rheumatism, heart disease, disease of eyes and kidneys and nervous affection. Occupation Driver.

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, 78-84-102- respiration, 20-22-24 temperature, N.

[Sitting, standing, after exercise.]

[Sitting, standing, after exercise.]

height, 5 feet 1/2 inches; actual weight, 115 pounds; age, 66 (7) years.

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

Rheumatism:- Rheumatic soreness in right shoulder joint, with crepitation. No enlargement of joint or atrophy or swelling of muscles, no contraction or impaired motion. There is rheumatic soreness over both lumbar muscles, with stiffness and pain upon stooping and rising. No atrophy or swelling of muscles. All other joints and muscles normal.

Disease of Heart:- Apex beat normal, and evident upon palpation Auscultation reveals a weakened force of heart's action together with a diastolic murmur of loudest intensity at apex beat, denoting mitral stenosis. There is dilatation of right ventricle with dyspnoea and recurrent edema of ankles. No cyanosis.

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.

Disease of Breast, and Chest:- No objective evidence of disease of breast and chest. Chest at rest 32- full inspiration 34-1/2 - full expiration 32. Percussion elicits a clear sound and auscultation reveals a respiratory murmur. Bronchi normal.

Disease of Back:- Described under rheumatism.

Disease of Kidneys:- Specific Gravity 1020- acid reaction- amber color, no albumin, sugar or other abnormal deposits.

Disease of eyes:- Lids, conjunctiva, pupils and cornea normal.

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."

Vision both eyes and right or left eye 20/30.

Diarrhoea and Piles:- No emaciation or debility, abdominal organs and rectum normal.

General Debility:- Nutrition and muscular development good.

Disease of Rectum:- The Rectum is normal.

Nervous affection:- No objective evidence of nervous affection

Disease of Throat:- No objective evidence of disease of throat.

No other disability found to exist. No evidence of vicious habits.

We find that the aggregate permanent disability for earning a support by manual labor is due to rheumatism, disease of heart, and age, not due to vicious habits and warrants a rate of \$12.

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

A. J. [Signature], Pres. *W. A. Janett*, Sec'y. *J. C. Meloy*, 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.