

3-155.
Old No. 3-111.

SURGEON'S CERTIFICATE.

Insert character and number of claim.

Increase Pension Claim No. Cert. 29 751,

Name of claimant.

Edward H. Tasker

Address

Baltimore, P. O.

of

Maryland, State.

Claimant's post-office address.

Company H, 30, Reg't U.S.C.T. & U.S. Navy

Annapolis, Anne Arundel Co., Md.

April 11, 1903, 190

[Date of examination.]

Names of disabilities.

Rheumatism, asthma, neuralgia and affection of lungs.

He receives a pension of Six 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: "Contracted rheumatism in the army. Have pains all over me, and cannot do any hard work."

Birthplace, Annapolis, Md.; age, 60 years; height, 5-5; weight, 125 pounds; complexion, Black; color of eyes, Dark; color of hair, Black; occupation, Light Labor; 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, 78, 86; respiration, 14, 16, 24; temperature, 98

[Sitting, standing, after exercise.]

[Sitting, standing, after exercise.]

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

Rheumatism: He has no deformity or limitation of motion of joints, but all his joints are crepitant and painful upon manipulation. He complains of severe muscular pains in the intercostal region and also lumbar pains in stooping and rising. He is generally debilitated from the effects of age, to which the rheumatic pains may be ascribed. He is able to perform but little manual labor. Heart normal in size, position and function. Apex impulse apparent by palpation in fifth interspace, 1-1/2 inch to right of left nipple. He has no dyspnoea, edema or cyanosis.

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

Asthma; Lungs. His lungs are in healthy condition. He has no cough. No symptoms of asthma. Chest symmetrical; expiration 33, rest 34, inspiration 35.

He presents no objective symptoms of Neuralgia.

No other disability found to exist. Urine light amber. S. G. 1020. Acid. No albumen or sugar.

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.

He presents no symptoms whatever of syphilitic infection or other vicious habits.

We find that the aggregate permanent disability for earning a support by manual labor is due to Rheumatism and General Debility, not due to vicious habits, and warrants a rating of \$8.00.

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

A. D. White, Pres. Geo. R. Baker, Sec'y. G. Lane Tanyhill, Treas.

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

Marginal entries must never be made.