

DUPLI

FFEREE.

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.

576473

Rank, Private

Original
Nathaniel Hickman
Company H, 7th Reg't U.S.C.T. Baltimore State, Md
749 Raborg St Baltimore Md
(Post office address of the Board.)
December 4th, 1889
(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.

Pleurisy Cough Hemorrhages Disease of Lungs Disease of heart Rheumatism Scurvy & effects Diarrhoea Mumps Disease of Throat Testis

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

and that he receives a pension of \$0 dollars per month.

Pulse rate per minute, 100; respiration 24; temperature, 99; height, 5 feet 5 1/2 inches; weight, 125 pounds; age, 43 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.

Original
Claims that as result of above disabilities he is unable to perform manual labor - Has severe cough with expectoration - and occasional hemorrhage.

Upon examination we find the following objective conditions:

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.

General physical condition below par. Somewhat emaciated skin and conjunctivae normal Tongue slight brownish coating Chest measurement - 33 1/2 Inspiration 34 1/2 Expiration 33. Right lung. Slight dullness over upper lobe with increased vocal resonance also some increase over lower lobe posteriorly No rales. Harsh bronchial respiration over both lungs especially the right. Left lung. percussion sounds are normal but complain of sensitiveness. No evidence of pleurisy. He evidently suffers from Bronchitis. No crepitation or deformity of joints but complain of sensitiveness in handling of the limbs. Probably suffers from Rheumatism Heart normal except some toughening of

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 the 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.

From the existing condition and the history of this claimant, as stated by himself, it is, in our judgment,

probable that the disability was incurred in the service as he claims, and that it has not been prolonged or aggravated by vicious habits. He is in our opinion, entitled to a

rating for the disability caused by disease of Lungs, 2/18 for that caused by Rheumatism, 12/18 caused by Chr Diarrhoea 4/18 Scurvy; O Disease of heart Throat Testis Mumps & Pleurisy

A. H. White, Secy. Geo R Graham, Trans.

N.B. - A certificate of examination whether a disability is found to exist or not.