

(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, &c.

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.

ORIGINAL

[State above whether for original, increase, or restoration.]

Pension Claim No. 995857

Name and rank of claimant.

FREDERICK GRAY

Rank, PRIVATE

Claimant's post-office address.

Company G, 39th Reg't U.S.C.T.

BALTIMORE, MD.

State,

2421 HUTCHINS ALLEY, BALTO. MD.

[Post-office address of the Board.]

JULY 8th

, 189 .]

[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.

Rheumatism and Injury to right side.

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

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

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

[Original, increase, restoration, &c.]

Claims to suffer with rheumatism in the back and right hip and in the right shoulder. Occasionally in the legs.

Has not worked since last April on this account.

Has no injury of the right side other than the rheumatism.

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

Upon examination we find the following objective conditions: Pulse rate, 72; respiration, 18; temperature, N; height, 5 feet 7 inches; weight, 140 pounds; age, 47 years. General physical condition fair.

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

Rheumatism: Crepitation in the right shoulder with pain on manipulation. Some limitation of motion on account of the pain. Also pain on manipulation in the right knee.

Extreme sensitiveness in the right lumbar region and about the right hip with great pain on motion. Has much difficulty in stooping and lifting. When bending the body he gives way at the right knee.

Evidently suffers severely with rheumatism.

Heart and Lungs are normal.

No evidence of injury to the right side.

No other disability exists.

Rate for EACH cause of disability.

He is, in our opinion, entitled to a 10/18 rating for the disability caused by Rheumatism for that caused by \_\_\_\_\_, and \_\_\_\_\_ for that caused by \_\_\_\_\_

White, Pres. [Signature] Sec'y. Geo R. [Signature] Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.