3—155.

# CERTIFICATE OF MEDICAL EXAMINATION.

Insert character and number of claim. Increase Pension Claim No. 1C. 2482261

Name of claimant. Benjamin Walsh

Company B Reg't 19. U S C Inf

Claimant's post-office address. 934 Pierce St Balto Md

Address of Board. Baltimore P. O. Md State.

May 28, 1924 [Date of examination.]

Names of disabilities. Gun Shot wound, Dorsal Condition of Exp — Feebleness

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He receives a pension of _____ 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. Cant 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; [Sitting, standing, after exercise.] respiration, 16. [Sitting, standing, after exercise.]; 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 — When effort quite accelerated. Lungs in good Condition. Kidneys Urine Amber Color acid Sp Gr 1021. But despite the fair Condition I there Digains 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 Petersburge: the bullet entered in the right leg at Outer Side of the femer at its middle & made its exit on the underside downward a little toward the patella. Muscles were impaired and Shows Shrinkage & tissue. & He has always been lame from it

Act June 5-20, Survivors Spanish War: Estimate incapacity from all causes not due to vicious habits at one-fourth, one-half, three-fourths, or total.

His Claimant Can only move clumsily about his room by the use of Crutches. He is feeble and Spends much time in bed.

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 says "he Can dress himself, but gives him much trouble and pain to do so" His Applicant requires the Regular Aid and attendant of Another person — I find no evidence of previous Vicious Habits.

*§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 so debilitated and feeble by reason of the above described Condition as 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. C M Dodson, Sec'y. _____, Treas.

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

Marginal entries must never be made.