

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. Increase Pension Claim No. 592,816
 [State above whether for original, increase, or restoration.]
 Name and rank of claimant. Perry Byron, Rank, Priv
 Company H, 30th Reg't U.S.C.V. Inf. Baltimore, Md State,
 Claimant's post-office address. 1813 Lorman St [Post-office address of the Board] July 15th, 1896.
 [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

Cause of disability. in the service, viz: rheumatism - chronic diarrhoea & dis. of re-
ctum - affection of the back & kidneys - affection of heart, nerves
chest, breast & throat
 If a pensioner, fill in the amount; if not, erase the whole line. and that he receives a pension of 12 dollars per month.

Here give the claimant's statement as briefly and as compactly as possible. He makes the following statement upon which he bases his claim for Increase
 [Original, increase, restoration, &c.]
He has rheumatism, chronic diarrhoea and
disease of rectum. Affection of the back - kidneys
heart, nerves, chest, breast & throat

Upon examination we find the following objective conditions: Pulse rate, 66; respiration, 22; temperature, n; height, 5 feet 2 inches; weight, 130 pounds; age, 62 years. Gen Physical condition good

Here give a full description of every existing disability, in accordance with Book of Instructions. Rheumatism - There is rheumatic tenderness
over the right shoulder joint without atro-
phy or swelling of muscles or enlargement
of joint. There is crepitation with contrac-
tion of the capsular ligament, slightly
impairing the motion of flexion. The
claimant being unable to touch the right
shoulder with the fingers of the affected
side to within two inches. Rate 7/10

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. Chronic diarrhoea - There are no objective
symptoms of chronic diarrhoea.
Disease of Rectum - The rectum is normal.
Affection of the back - no objective symptoms
of affection of the back.
Affection of kidneys - Urinary analysis re-
veals a normal condition of kidneys.

Each disability must be rated separately, the act of Congress of Mar. 2, 1895, requiring that the report of such examining surgeons shall specifically state the rating which, in their judgment, the applicant is entitled to. Affection of heart - apex beat normal and
evident upon inspection. Auscultation
reveals an increased force of heart's action
together with a diastolic murmur of loud-
est intensity at apex beat, denoting a mi-
tral stenosis. There is hypertrophy of right
ventricle. There is dyspnoea & oedema.
Pulse rate sitting is 66 - standing 80 - upon
brisk exercise 90. Rate 8/10

A. Hayton, Pres. H. A. Jarrett, Sec'y. D. C. Ireland, Treas.

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