

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.

*McCrace* Pension Claim No. *453726*

Name and rank of claimant.

*David Price*, Rank, *Art*

Claimant's post-office address.

Company *D, 30 Regt W.S. Ct. Inf* *Washington DC* State,

*15 Washington St Annapolis* [Post-office address of the Board.] *June 13*, 189*6* [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: *Rheumatism and resulting disease of heart*

Cause of disability.

*and results Dis of left lung & lumbar region*

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

and that he receives a pension of *17* dollars per month.

He makes the following statement upon which he bases his claim for [Original, increase, restoration, &c.]

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

*That he has rheumatism in his neck, back and shoulders and knees. Thinks his heart is very much affected that he has attacks of pain and vertigo - indicates affection of left lung by placing hand over left side of abdomen. That he has pain in small of back*

Upon examination we find the following objective conditions: Pulse rate, *100-108-120* respiration, *24*; temperature, *N*; height, *5 feet 6 inches*; weight, *190* pounds; age, *50* years.

Here give a full description of the disability, in accordance with book of instructions.

*Rheumatism. No swelling, no enlargement, no crepitus in either shoulder. He complains of pain in both on manipulation and there is apparently slight stiffness. The same condition is found to be present in the knees - the left being slightly more stiff than the right. He stoops and regains upright with evident difficulty and complains of pain. He complains of tenderness or pressure over the lumbar region. The trouble is more a muscular condition. No atrophy or contraction of muscles or tendons. Date 6/18*

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.

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.

*Heart Action rapid regular and of medium quality. Marked mitral systolic murmur. No oedema. Some dyspnoea after exercise. Apex impulse strong to vicinity, not evident. Date 6/18*

*Lungs. We do not find any diseased condition of either lung. Percussion and auscultation sounds clear. Date 6/18*

*J. J. [Signature]* Pres. *Wm. Compton*, Sec'y. *[Signature]*, Treas.

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