

(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.

INCREASE

Pension Claim No. 538,719

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

Name and rank of claimant.

GEORGE C. MILLER

, Rank, PRIVATE

Claimant's post-office address.

Company D 30th. Reg't U.S.C. INF.

BALTIMORE, MD.

State,

[Post-office address of the Board.]

ANNAPOLIS MD.

JANUARY 13th.

, 1893.

[Date of examination.]

Cause of disability.

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: Shell wound of hip.

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

and that he receives a pension of \$6.00. 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.]
Claims increase on the ground that the disability has increased. Received shell wound of left hip and suffers with severe pains in the hip extending to back and down the leg. Pains are much worse in bad weather. Unable to perform hard manual labor on this account.

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

Upon examination we find the following objective conditions: Pulse rate, 116; respiration, 18; temperature, N; height, 5 feet 3 inches; weight, 135 pounds; age, 47 years. General physical condition is good.
Superficial scar on outer aspect of left hip, 2 1/2 inches below the greater trochanter, claimed to be result of shell wound. Scar is 3/4 inch long, non-adherent, not sensitive and causes no apparent disability.
Suffers with rheumatism of left hip and thigh and in lumbar region which he believes to be the result of the wound, but which could hardly be the case.
Sensitiveness of muscles about left hip and thigh and in left lumbar region. Complains of pain in walking and when stooping and rising. States that leg becomes very stiff and sore and is worse in bad weather. Gait is limping and evidently painful. There is no evidence of rheumatism in other parts of the body.
Condition would interfere with the performance of hard manual labor and we recommend rating of eight-eighteenths for Rheumatism and results.
Heart, lungs and abdominal organs are in healthy condition. Pulse is very rapid but action otherwise normal. We can find no apparent reason for this and he states that this is always the case.
No other disability exists.

Rate for EACH cause of disability.

He is, in our opinion, entitled to a 8/18 rating for the disability caused by Rheumatism for that caused by _____, and _____ for that caused by _____

A. B. White, Pres. E. S. ..., Sec'y. Geo. R. ..., Treas.

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