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SURGEON'S CERTIFICATE

Insert character and number of claim. Increase Pension Claim No. C 453,726

Name of claimant. Daniel Price

Address of Board. Washington, D.C. P.O.

Company D 30 Reg't U.S.C. Inf ______ State.

Claimant's post-office address. 18 Clay St, Annapolis, Md JUN 1 1 1913, 19 [Date of examination.]

Names of disabilities. Rheumatism & resulting disease of heart

______. He receives a pension of 17 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: Rheumatism (1864); disease of heart (1864); deafness (1872).

Birthplace, Annapolis, Md; age, 68 years; height, 5'-5"; weight, 195 pounds; complexion, negro; color of eyes, brown; color of hair, gray; occupation, none; permanent marks and scars other than those described below, ______

We hereby certify that upon examination we find the following objective conditions:

Pulse rate, 90 - 100 - ? [Sitting, standing, after exercise.]; respiration, 20 - 24 - ? [Sitting, standing, after exercise.]; temperature, normal;

Here give a full description of the disabilities, in accordance with Book of instructions, and make a separate paragraph for each disability.

Facts within the knowledge of the Board, or any member thereof, relative to the cause of any disability found should be stated.

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.

When rates are recommended solely on subjective evidence the strongest reasons must be given therefor.

Rheumatism; Muscular in character; no swelling or deformity; but all movements are slow; extreme flexion & extension are evidently painful — all muscles of legs & arms are affected; stoops & regains erect posture slowly & with evident difficulty; has difficulty in taking off & putting on his clothes; walks slowly; does not use a cane. Rate 17/18

Heart: Apex beat in nipple line & 3" in. below nipple; rhythm regular; strength good; mitral regurgitant murmur; no cyanosis or oedema or dyspnoea (3 or feeble & exercise) Rate 8/18

Lungs: Chest measurements 39"-41"; normal upon inspection, percussion & auscultation. Rate 0/18

Ears: Hears ordinary conversation, either ear, at 6 ft. Rate 0/18

Urine: Color amber, acid, sp. gr. 1020; trace of albumen (see heart); no sugar. Rate 0/18.

No trouble with prostate, rectum or nervous system.

This claimant is so disabled from rheumatism & disease of heart as to be incapacitated in a degree equivalent to the loss of a hand or foot for the purpose of manual labor & is entitled to $24. per month.

No other disability. No evidence of vicious habits.

C. H. Bowker, Pres. W. M. Spurnbury(?), Sec'y. E. B. Fadell(?), Treas.

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