

3-155.
Old No. 3-111.

SURGEON'S CERTIFICATE.

Insert character and number of claim. Increase Pension Claim No. 490 607

Name of claimant. James Wilson Address { Baltimore, P. O.
of Board. { Maryland, State.
May 14, 1901, 190
[Date of examination.]

Company H, 7, Reg't U.S.C. Inf.

Claimant's post-office address. Island Creek, Calvert Co., Md.

Cause of disability. Lumbago and injury of right foot from burn, general debility, rheumatism of back and spine.

He receives a pension of Six 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: "Contracted rheumatism in army during the war.
Have suffered ever since with pains all over me. Foot was burned accidentally while in service."

The outlines of the human skeleton and figure upon the back of this certificate should be used to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

Birthplace, Calvert Co., Md.; age, 55 years; height, 5-4; weight, 148 pounds; complexion, dark; color of eyes, black; color of hair, black; occupation, laborer; permanent marks and scars other than those described below, None

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

Pulse rate, 60, 68, 74; respiration, 16, 18, 20; temperature, 98;
[Sitting, standing, after exercise.] [Sitting, standing, after exercise.]

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

Lumbago; Rheumatism: All joints and muscles normal in size and function. He has no objective symptoms of rheumatism.
Heart--Apex impulse apparent by palpation in fifth interspace, one inch to right of left nipple. Cardiac dullness extends from apex, to middle of sternum and to fourth left chondro-costal articulation. Action is regular. Valves good. No hypertrophy or dilatation. No dyspnea, cyanosis or oedema.
No rating.

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.

Injury to Right Foot: He has a small scar of a burn on the outer aspect of the right foot; superficial. Causes no disability. No rating.

No symptoms of General Debility. No rating.

Spine: No impairment of mental, spinal or nervous functions. No chronic meningitis. No arcus senilis. No vertigo, spasms, convulsions or nausea. No paralysis, local or general. No difficulty swallowing. Breathing regular. No impairment of coordination of movements. No muscular tremor. No rating.

We have carefully examined his mucous membranes, skin, hair, bones, penis and glands, and find no evidence of syphilitic infection or other vicious habits.

Except as above, all organs normal. Chest symmetrical; expiration 35, rest 36, inspiration 37-1/2. Urine pale. S. G. 1018. Acid. No sugar or albumen.

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

No disability found to exist

A. A. White, Pres. Geo. R. Harrison, Secy. G. Lane Tamm, Treas.