

1 **EXAMINING SURGEON'S CERTIFICATE** 1

IN THE CASE OF AN ORIGINAL APPLICANT.

No. of Application, 268983

State: Md County: Baltimore  
Post Office: April 8<sup>th</sup>, 1888

We hereby certify That WE have carefully examined William Wells, late a pr.  
Co. C, 19<sup>th</sup> Reg't, US Colored Troops  
in the service of the United States, who is an APPLICANT for an  
invalid pension by reason of alleged disability resulting from gun wound

Applicant's service.

Degree of disability.

In our opinion the said William Wells  
is one half disabled and incapacitated for obtaining his subsistence  
by manual labor from the cause above stated.

Origin.

Judging from his present condition, and from the evidence before  
us, it is our belief that the said disability did not originate  
in the service aforesaid in the line of duty.

Probable duration.

The disability is permanent

Particular description.

A more particular description of the applicant's condition is subjoined:  
Height, 5-7 1/2; weight, 160; complexion, RU;  
age, 47; pulse, 78; respiration, 16  
gun wound, Right wrist = Ball enters in inner  
aspect right fore arm one  
inch above wrist joint and passed  
down and out two inches in front of  
and below entrance - Results: atrophy  
hand one inch - prehensile power impaired -  
last 3 fingers permanently flexed one  
fourth - little finger is a mechanical  
impediment Use of hand is impossible  
& painful

J. M. Dodge  
Examining Surgeon.

J. M. Barrett  
Asst. Surg. Genl.