

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, etc.

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. *50830*

Name and rank of claimant. *Mrs Woolford*, Rank, *Pri'*

Company *D, 7 Reg't*, *USCG* *Lower Del.* State, *Del.*

Claimant's post office address. *Cambridge Md.* (Post office address of the Board.) *Oct 6*, 188*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:

Cause of disability. *Amputation of left arm above the elbow.*

If a pensioner, fill in the amount; if not, erase the whole line. and that he receives a pension of *Monthly* dollars per month.

Pulse rate per minute, *88*; respiration, *18*; temperature, *98.5*; height, *6* feet *1* inches; weight, *160* pounds; age, *47* years.

He makes the following statement upon which he bases his claim for † *He says he attempted to wear an artificial limb but could not keep it in place on account of the short stump & has not attempted since.*

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

Upon examination we find the following objective conditions: *Amputated*

Here give a full symptom picture of the case, embracing all the physical and rational signs, but confining it to the present condition of the claimant. *obtusely through the surgical neck the inner edge of the bony stump is prolonged & subcutaneous measuring 3 in from the head of the bone. The cicatrix is very painful with loss of soft tissue over the end of the bone. Stump is too short for an artificial limb & the cicatrix is very sensitive & the bone subcutaneous. Cannot possibly use a hand.*

It must be borne in mind that the duty of the Surgeon is to give an opinion as to the proportionate degree of disability, as total, &c., through the grades, without any regard to dollars and cents, and to make such a full particular description as will afford to this Office the ground for intelligent opinion and action in rating.

From the existing condition and the history of this claimant, as stated by himself, it is, in our judgment, probable that the disability was incurred in the service as he claims, and that it has not been prolonged or aggravated by vicious habits. He is, in our opinion, entitled to a rating for the disability caused by _____, for that caused by _____, and _____ caused by _____.

Rate for each cause of disability. If prolonged by vicious habits, the word not should be erased and the reason for the erasure given.

Rate for the disability caused by _____, for that caused by _____, and _____ caused by _____.

* See the back.
 † Here state whether for original, increase, restoration, or renewal, or for a re-rating.

A. Breudich Pres. *A. B. B. B.* Sec'y. *J. P. B. B.* Treas.

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

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