

3-155.
Old No. 3-111.

SURGEON'S CERTIFICATE.

Insert character and number of claim.

Innocent

Pension Claim No. 340556

Name of claimant.

Robert Riley

Address of Board.

Easton

P. O.

Company B 7 Reg't U.S.C.

State.

Claimant's post-office address.

Centerville, Colman Co. Md
Blumenthal, Mrs. of Heart

[Date of examination.]

Cause of disability.

He receives a pension of \$24.00 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: I have Rheumatism in all of my R. and left my joints - joints all good - my knees joints swell up at times
Scars hardly get my beauty - I have pain in my left side

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, Queen Anne's Co. Md; age, 70 years; height, 3-8; weight, 169 pounds; complexion, Rsh; color of eyes, Rsh; color of hair, Rsh; occupation, laborer; permanent marks and scars other than those described below, _____

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

Pulse rate, 88-94-120; respiration, 15-20-24; temperature, 99; [Sitting, standing, after exercise.]

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

Rheumatism - 88-94-120 15-20-24 99 Swelling in enlargement of
my joints - no atrophy or contraction of any muscles in
hands - no limitation of motion at this time - 1/18
Heart - apex beat in 5th space - dullness from 2nd to apex
there is a distinct regurgitant murmur with a faint impulse
at apex. Hypertrophic scleritis with degeneration of the
myocardium. Has constant dyspnea, worse at night -
Some edema of ankles & abdominal wall - sound cyanosis
arteries hard - 7/18
Legs - varicose veins caused by hypertensive is lower legs
of both legs 7/18
Arteries - some highly calcified - acid - 10/18 - slight
amount albumin by albumin - no sugar by Benedict test 1/18
Vision is well preserved - eyes are fairly - areas senile
marked - atrophy of optic nerve

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.

We find the appropriate payment disability for pension
or support by medical books is due to Heart Disease
Rheumatism & High Blood Pressure due to vicious habits
sums a rate of \$20.00 for me

This claimant is disabled from Heart Disease
& Rheumatism so he is unemployable for performing any
manual labor as entitled to \$30.00 for me

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

Robert, Pres. [Signature], Sec'y. [Signature], Treas.

N. B.—Do not use backs of certificates for any purpose other than indicated by printed matter thereon. When additional space is needed to complete report of examination use blank certificate (Old No. 3-156, 3-111 g.) properly numbered, and attach it to the back and upper margin of this sheet. Marginal entries must never be made.