

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.

Original

Pension Claim No. 1188678

Name and rank of claimant.

Oscar J Crozier

Rank, Private

Claimant's post-office address.

Company B, 54 Reg't W S C T

Baltimore Md State,

Chestertown Md

[Post office address of the Board.]

June 1st

[Date of examination.]

1897.

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: Affection of left eye, injury to back and Rheumatism.

Cause of disability.

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of \_\_\_\_\_ dollars per month.

He makes the following statement upon which he bases his claim for Original

[Original, increase, restoration, &c.]

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

Blind in left eye. Was wounded at battle of Olustee. Have rheumatism and cannot work.

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

Upon examination we find the following objective conditions: Pulse rate, 76; respiration, \_\_\_\_\_; temperature, 98; height, 5 feet 6 inches; weight, 135 pounds; age, 52 years. Affection of left eye. Has a linear scar 3/4 inch long running inwards from outer angle left superciliary ridge concealed by eyebrow non adherent. Non dragging non sensitive claims to have received the injury at battle of Olustee. The scar in itself causes no disability. The claimant has an atrophied left optic nerve. The left eye is sightless, The lens, cornea and conjunctiva are in a healthy condition. The pupil exhibits very little sensibility to light or shade is somewhat dilated. Right eye is normal in every respect. Vision Left eye, Nil, Right eye 20/30.

The actual or probable origin of every existing disability must be fully set forth. 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.

The board is unable to determine whether the blindness of the eye is due to the injury claimed to have been received in battle. Loss of sight of one eye.

Rating 12/18

Rheumatism - No deformity of joints bones or tendons, Crepitation in right shoulder and both knees with pain on motion in all joints. very severe in the hips, Back is marked all over Lumbar region with cupping scars, lumbar muscles are atrophied in equal degree on both sides. very sensitive to touch and painful in stooping over. No other atrophy of muscles. Heart normal in position area action and sounds

Rating 8/18

No other disability found

No evidence of vicious habits.

Each disability must be rated separately, the act of Congress of March 2, 1895, requiring "that the report of such examining surgeons shall specifically state the rating which, in their judgment, the applicant is entitled to."

A A White, Pres. Geo R Graham, Sec'y. John Boyd, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not. If sufficient space is not afforded for the necessary statements called for, additional paper should be neatly attached.