

ANNUAL REPORT
OF THE
DIRECTOR
UNITED STATES
VETERANS' BUREAU

FOR THE FISCAL YEAR
ENDED JUNE 30

1927



UNITED STATES
GOVERNMENT PRINTING OFFICE
WASHINGTON
1927

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CONTENTS

	Page
1. List of charts.....	v
2. List of tables.....	vii
3. Letter of transmittal.....	xi
4. Introduction.....	1
5. Medical service.....	8
6. Adjudication service.....	34
7. Director's advisory group on appeals.....	46
8. Legal service.....	47
9. Finance service.....	53
10. Construction division.....	55
11. Supply service.....	57
12. Statistical tables.....	61
13. Appendix:	
New legislation.....	137
Index.....	153

**LIST OF CHARTS FOR THE 1927 ANNUAL REPORT, UNITED STATES
VETERANS' BUREAU, IN ORDER OF APPEARANCE**

	Page
CHART No. 1.—United States Veterans' Bureau, actual number of patients remaining in all hospitals from October, 1919, to July, 1927---facing--	30
CHART No. 2.—United States Veterans' Bureau, active compensation disability awards each month from January, 1919, to July, 1927 -facing--	34
CHART No. 3.—United States Veterans' Bureau, converted life insurance policies in force -----facing--	42
CHART No. 4.—United States Veterans' Bureau, personnel -----facing--	58

▼

LIST OF TABLES FOR THE ANNUAL REPORT, FISCAL YEAR 1927

MEDICAL TABLES

	Page
TABLE No. 1.—Clinical laboratory classified tests in the United States Veterans' Bureau dispensaries for the fiscal years 1924, 1925, 1926, and 1927-----	62
TABLE No. 2.—Clinical laboratory classified tests in the United States veterans' hospitals for the fiscal years 1924, 1925, 1926, and 1927-----	62
TABLE No. 3.—X-ray examinations in the United States Veterans' Bureau dispensaries for fiscal years 1924, 1925, 1926, and 1927, classified by type of examination-----	63
TABLE No. 4.—X-ray examinations in the United States veterans' hospitals for the fiscal years 1924, 1925, 1926, and 1927, classified by type of examination-----	63
TABLE No. 5.—Total out-patient medical service by service rendered for fiscal years 1924, 1925, 1926, and 1927-----	63
TABLE No. 6.—Classification of total examinations by kind of examination for fiscal years 1924, 1925, 1926, and 1927-----	63
TABLE No. 7.—Classification of total treatments by kind of treatment for fiscal years 1924, 1925, 1926, and 1927-----	64
TABLE No. 8.—Total treatments divided into medical and dental, salary and fee, with per cent of fee for fiscal years 1924, 1925, 1926, and 1927--	64
TABLE No. 9.—Total examinations divided into medical and dental, salary and fee, with per cent of fee for fiscal years 1924, 1925, 1926, and 1927-----	64
TABLE No. 10.—Physiotherapy activities in hospitals and dispensaries, fiscal year 1927-----	64
TABLE No. 11.—Regional nursing activities for the fiscal years 1925, 1926, and 1927-----	65
TABLE No. 12.—Distribution of patients receiving occupational therapy and classification of hours given to each subject in United States veterans' and contract hospitals for fiscal years 1925, 1926, and 1927-----	65
TABLE No. 13.—Hospital report of United States Veterans' Bureau patients in Government and civilian institutions as of June 30, 1927-----	66
TABLE No. 14.—Admissions to all hospitals by fiscal year 1920-1927-----	67
✓ TABLE No. 15.—Admissions of United States Veterans' Bureau patients by beneficiary, groups of hospitals, and type of patient, fiscal year 1927--	68
✓ TABLE No. 16.—Admissions of United States Veterans' Bureau patients by branch of service and type of admission, fiscal year 1927-----	69
✓ TABLE No. 17.—Admissions to hospitals of United States veterans of all wars without regard to nature of origin of their disability as authorized in paragraph 10, section 202, World War veterans' act, 1924, revised, by type of beneficiary and groups of hospitals, fiscal years 1925-1927--	70
✓ TABLE No. 18.—Admissions of United States Veterans' Bureau patients to all hospitals by branch of service, type of patient, and sex and color, fiscal year 1927-----	70
TABLE No. 19.—Yearly turnover of patients in United States veterans' hospitals operating during fiscal years 1920-1927-----	71
✓ TABLE No. 20.—Patients of the United States Veterans' Bureau under treatment in all hospitals, June 30, 1927, by class of beneficiary, groups of hospitals, and type of patient-----	72
✓ TABLE No. 21.—Patients of the United States Veterans' Bureau under treatment in all hospitals, exclusive of United States possessions, by sex and color, at the close of each fiscal year, 1923-1927, inclusive-----	73
✓ TABLE No. 22.—Patients under treatment by the United States Veterans' Bureau in all hospitals exclusive of United States possessions, by branch of service, type of patient, and home address (State), June 30, 1927-----	74

	Page
✓ TABLE No. 23.—Patients of the United States Veterans' Bureau under treatment in hospitals in their home State, by groups of hospitals and type of patient, at the close of each fiscal year 1923-1927.....	77
✓ TABLE No. 24.—Patients of the United States Veterans' Bureau under treatment in all hospitals, exclusive of United States possessions, by State location of hospital and patient's State of residence, June 30, 1927.....	78
✓ TABLE No. 25.—Discharges of United States Veterans' Bureau patients, by beneficiary, groups of hospitals, and type of patient, fiscal year 1927..	82
✓ TABLE No. 26.—Discharges of United States Veterans' Bureau patients, by class of disease and disposition or condition on disposition, showing average days hospitalized, fiscal year 1927.....	83
TABLE No. 27.—Movement of patient population, showing type of admission and result of treatment, fiscal year 1927.....	86
TABLE No. 28.—Discharges from hospitals of all patients of the United States Veterans' Bureau, by disposition or condition on disposition and type of patient, fiscal year 1927.....	88
TABLE No. 29.—Comparison of principal causes of death of United States Veterans' Bureau patients in all hospitals, fiscal years 1924-1927.....	89
TABLE No. 30.—Discharges from hospitals of female patients of the United States Veterans' Bureau, by disposition or condition on disposition, and type of patient, fiscal year 1927.....	91
TABLE No. 31.—Discharges from hospitals of colored patients of the United States Veterans' Bureau by disposition or condition on disposition and type of patient, fiscal year 1927.....	91

COMPENSATION TABLES

TABLE No. 32.—Summary of regional activities.....	92
TABLE No. 33.—Number of compensation death and disability claims received, by fiscal years from June 30, 1918, to June 30, 1927, inclusive..	93
TABLE No. 34.—Number of compensation death and disability awards, by fiscal years from October, 1917, to June 30, 1927, inclusive.....	93
TABLE No. 35.—Gross number of compensation awards on which payments have been terminated, analyzed as to reasons for terminations, during fiscal year 1927.....	93
TABLE No. 36.—Compensation, active disability awards; comparative analysis of special classification of major disability, by extent of disability, by fiscal years, June 30, 1923-June 30, 1927.....	94
✓ TABLE No. 37.—Compensation, active disability cases; degree of impairment and extent of disability correlated with classification of major disability, showing number and amount of monthly payments, as of June 30, 1927.....	95
✓ TABLE No. 38.—Compensation, active disability awards; relationship of beneficiary to claimant, showing number and amount of monthly payments, as of June 30, 1927.....	99
✓ TABLE No. 39.—Compensation, active death awards; number of deceased veterans, showing relation of dependents to veteran and amount of monthly payments to dependents, as of June 30, 1927.....	99
✓ TABLE No. 40.—Number of deceased veterans whose dependents are receiving compensation or compensation and insurance payments, with amount of monthly payments to dependents, as of June 30, 1927.....	100

REHABILITATION TABLE

TABLE No. 41.—Rehabilitation activities as of the close of each fiscal year from June 30, 1919, to June 30, 1927, showing the origin of each status..	101
---	-----

INSURANCE TABLES

TABLE No. 42.—Number of United States Government term and converted insurance claims received by fiscal years from June 30, 1918, to June 30, 1927.....	102
TABLE No. 43.—Number of United States Government term and converted insurance death and disability awards, by fiscal years, from June 30, 1918, to June 30, 1927.....	102

	Page
TABLE No. 44.—Term insurance, active disability and death awards; classification of major disability causing permanent total disability or death of veteran, and amount of insurance in force, as of June 30, 1927.....	103
TABLE No. 45.—Term insurance, terminated disability and death awards; classification of major disability of veteran and reasons for termination showing amount of insurance in force, as of June 30, 1927.....	104
TABLE No. 46.—Automatic insurance, active disability and death awards; classification of major disability, causing permanent total disability or death of veteran and amount of insurance in force, as of June 30, 1927.....	105
TABLE No. 47.—Automatic insurance, terminated disability and death awards; classification of major disability of veterans and reasons for termination, as of June 30, 1927.....	105
TABLE No. 48.—Converted insurance death claims awarded during calendar year 1926, classified by plan of insurance.....	106
TABLE No. 49.—Total converted insurance disability claims awarded during calendar year 1926, classified by plan of insurance.....	107
TABLE No. 50.—Converted insurance disability claims terminated during calendar year 1926 on account of death of insured, classified by plan of insurance.....	108
TABLE No. 51.—Converted insurance disability claims terminated during calendar year 1926 on account of recovery, classified by plan of insurance.....	109
TABLE No. 52.—Converted insurance death claims awarded during calendar year 1926, by class of disability causing death.....	110
TABLE No. 53.—Total converted insurance disability claims awarded during calendar year 1926, classified by cause of disability.....	111
TABLE No. 54.—Converted insurance disability claims terminated during calendar year 1926 on account of death of insured, by class of disability.....	112
TABLE No. 55.—Converted insurance disability claims terminated during calendar year 1926 on account of recovery, classified by cause of disability.....	114
TABLE No. 56.—Liability under yearly renewable term insurance claims, commuted value June 30, 1927.....	115
TABLE No. 57.—Report of United States Government life insurance in force, December 31, 1926; total, all plans.....	116
TABLE No. 58.—Report of United States Government life insurance in force, December 31, 1926; ordinary life.....	116
TABLE No. 59.—Report of United States Government life insurance in force, December 31, 1926; 20-payment life.....	117
TABLE No. 60.—Report of United States Government life insurance in force, December 31, 1926; 30-payment life.....	117
TABLE No. 61.—Report of United States Government life insurance in force, December 31, 1926; 20-year endowment.....	118
TABLE No. 62.—Report of United States Government life insurance in force, December 31, 1926; 30-year endowment.....	118
TABLE No. 63.—Report of United States Government life insurance in force, December 31, 1926; endowment at age 62.....	119
TABLE No. 64.—Report of United States Government life insurance in force, December 31, 1926; 5-year convertible term.....	119
TABLE No. 65.—Report of United States Government life insurance in force, December 31, 1926; extended insurance.....	120
TABLE No. 66.—Policy loans, United States Government life-insurance fund; repayments.....	121
TABLE No. 67.—Financial statement of the United States Government life-insurance fund, by calendar years, from origin of fund to December 31, 1926.....	122
TABLE No. 68.—Bond investments of United States Government life insurance fund as of June 30, 1927.....	123

ADJUSTED COMPENSATION TABLES

	Page
TABLE No. 69.—Number of applications for adjusted compensation, received by fiscal years from September, 1924, to June 30, 1927.....	124
TABLE No. 70.—Action taken on applications for adjusted compensation. fiscal year 1927.....	124
TABLE No. 71.—Death claims awarded on account of adjusted service certificates arranged by beneficiary, as of June 30, 1927.....	124

CENTRAL BOARD OF APPEALS TABLE

TABLE No. 72.—Appeal cases disposed of by sections of central board of appeals and appeal group on central office cases for fiscal year, 1927..	125
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FINANCE TABLES

TABLE No. 73.—Appropriations versus disbursements to June 30, 1927..	126
TABLE No. 74.—Analysis of obligations from all appropriations, fiscal year 1927.....	128
TABLE No. 75.—Disbursements made from all appropriations by fiscal years.....	129

CONSTRUCTION TABLES

TABLE No. 76.—Statement showing United States veterans' hospitals, existing facilities, and development of facilities under present appropriations only (the construction and evacuation program as outlined by this table is tentative, and is subject to such changes as may be indicated by future development in the hospital load).....	131
--	-----

PERSONNEL TABLES

TABLE No. 77.—Comparative statement showing, by location, the total personnel and aggregate annual salaries in the United States Veterans' Bureau, together with the net increase or decrease, for the fiscal year 1926-27.....	133
TABLE No. 78.—Comparative statement showing, by location, the estimated annual salaries of per diem and per hour employees, together with the net increase or decrease, for the fiscal year 1926-27.....	134

LETTER OF TRANSMITTAL

UNITED STATES VETERANS' BUREAU,
Washington, D. C., December 5, 1927.

*To the President of the Senate and the Speaker of the House of
Representatives of the Seventieth Congress:*

Pursuant to the provisions of section 14 of the act of June 7, 1924 (Public, No. 242, 68th Cong.), I have the honor to submit the following report of activities of the United States Veterans' Bureau for the fiscal year ended June 30, 1927.

This, the Sixth Annual Report of the United States Veterans' Bureau, indicates the extent of the bureau's responsibility under existing law, and the progress that has been made in carrying out the laws for the relief of veterans. For the information of Congress comment at length has been made upon the principal objectives of the bureau, and the policies and procedures which have been formulated to insure the uniform application of statutory benefits. The report also reveals the practical effect of the numerous amendments to the World War veterans' act of 1924. The majority of the statistical tables published in this report have been prepared to show the trend of each bureau activity over the past five years.

Respectfully,

FRANK T. HINES, *Director.*

ANNUAL REPORT FOR THE FISCAL YEAR ENDED JUNE 30, 1927

INTRODUCTION

The functions and objectives of the bureau during the fiscal year ended June 30, 1927, did not differ materially from those of the preceding fiscal period. But one new activity was added during this year, namely, that created by the act of March 3, 1927, whereby the director was authorized to make loans to veterans upon the security of their adjusted service certificates. Before the enactment of this amendatory legislation loans could only be made by banks or trust companies, and, although the majority of these agencies cooperated to the fullest extent, it was early apparent that some necessity existed for permitting veterans to procure loans from that Government agency to which they look for all other forms of veterans' relief. A separate division was established in the finance service of central office to administer the loan provisions of the World War adjusted compensation act, as amended, and to formulate policies and procedures to cover the functions of the bureau under the provisions of the act bearing upon loans on adjusted service certificates.

The work of the bureau during this period was directed largely toward accomplishing the following objectives: (1) The applying of the revised schedule of disability ratings to all active claims; (2) the reviewing of all claims in which there was a record of tuberculosis for the purpose of awarding the statutory \$50 award in cases where the tuberculosis had reached a stage of complete arrest; (3) the conducting of an intensive insurance campaign to acquaint veterans with their right to reinstate and convert term (war-time) insurance; (4) the completing of the hospital-construction program under existing authorities, and the making of the greatest possible use of existing facilities to meet the changes in the load of the various types of cases under treatment; (5) the perfecting of guardianship procedure to insure adequate protection for wards of the Government, both mentally incompetents and minors; (6) the fulfilling of the bureau's final responsibility in the matter of extending vocational rehabilitation benefits to veterans; and (7) the perfecting of administrative procedure and organization in both the central and field offices.

At the expiration of this fiscal year practically all active awards had been rerated under the new schedule of disability ratings, which was placed in operation on January 1, 1926. This involved a thorough review of all cases receiving compensation and a large number in which compensation had been terminated or disallowed under previous schedules. Perhaps the greatest feature of the new schedule

is the relatively liberal allowance provided for actual disablement, which in turn has resulted in a material increase in the average value of awards and the monthly disbursements for this purpose. A permanent board, composed of medical, legal, and occupational specialists, was established in central office during this year for the purpose of study revision and interpretation of the new schedule.

In measuring the practical effect of the numerous amendments of July 2, 1926, to the World War veterans' act, it is clearly evident that the amendment to section 202 (7), which provides for the payment of not less than \$50 per month for arrested tuberculosis, will prove the most costly and affect the greatest number of beneficiaries. On June 30, 1927, a total of 31,185 veterans had already been granted this statutory award and a net increase of \$12,417,109 disbursed for this purpose. It has been conservatively estimated that the number of beneficiaries receiving this benefit will ultimately reach 40,000, and that approximately \$600,000,000 will be paid out under this provision of law during the lifetime of these beneficiaries. In order to expedite the application of this benefit and insure proper compliance with the requirements of law relative to the determination of the existence and arrest of the tuberculosis condition, boards of tuberculosis specialists were established in each regional office to pass upon all matters affecting the claimant's right to this benefit. As a further means of insuring the receipt of this benefit by those entitled to same, a comprehensive review of all claims cases was made during the year.

The right to reinstate and convert term (war-time) insurance expired by law on July 2, 1927, or within two days after the close of this fiscal year. Accordingly, every effort was made and all possible means utilized during this fiscal period to induce veterans to take advantage of this valuable right. A nation-wide insurance campaign was inaugurated in January, 1927, and continued with unabated force until the end of the statutory period. The campaign in the field was under the direct supervision of the managers of the bureau's 54 regional offices, in cooperation with service and various welfare organizations, and other interested agencies. That this drive was productive of splendid results is indicated by the receipt since January 1, 1927, of approximately 245,000 applications for conversion of insurance, amounting to \$1,400,000,000. On June 30, 1927, there were in force 587,980 Government life-insurance policies (term and converted), aggregating \$2,893,044,640, which represents an increase of 34,320 policies during this fiscal year. It has been estimated that the ultimate net increase in the number of converted policies in force will exceed by approximately 125,000 the total number of term and converted policies in force prior to January, 1927.

The only new hospital opened during the year was Fort Snelling, Minn., where accommodations for 540 patients were erected upon land donated by the War Department. Additional beds, however, were acquired through new construction and a reallocation of space at three other bureau hospitals, while facilities for 159 tuberculous patients were erected out of bureau funds at the National Home for Disabled Volunteer Soldiers, Hot Springs, S. Dak. Construction was started on two neuropsychiatric hospitals, one with a capacity of 1,000 beds at Northport, Long Island, and the other with a capacity of 350 beds at Bedford, Mass. At the close of this year additional beds were

under construction at Palo Alto, Calif., while permanent wards to replace temporary ones were being built at Oteen, N. C., and the hospital operated by the War Department in Washington, D. C. In addition, plans and specifications were being developed for new bureau hospitals to replace the existing temporary Government-owned facilities at Tucson, Ariz., and Alexandria, La., and the hospital now leased at Portland, Oreg., and for the erection of facilities for approximately 50 general medical and surgical beds for observation cases in conjunction with the building of administration facilities for the regional office at Fargo, N. Dak.

As was the case in the preceding fiscal year, the bureau experienced considerable difficulty in providing adequate accommodations for psychotic patients. It is true that the authorized hospital load for this type of case varied but slightly throughout the year, but this condition may be attributed largely to the lack of available beds, for both continued treatment and observation cases. Some idea of the problem confronting the bureau with respect to adequate hospital accommodations of this type may be obtained from the fact that even with the additional beds to be acquired upon completion of the present authorized construction program there will not be sufficient Government facilities to absorb the service connected cases now receiving treatment at the bureau's expense in contract institutions. There are also numerous bureau beneficiaries whose guardians or relatives have expressed a desire to have transferred from State institutions, where they are now being maintained at private expense, to Government hospitals. Then, too, there are no facilities available for those cases whose disabilities have not been connected with military service, as authorized under section 202 (10) of the World War veterans' act. To meet this situation, and in the absence of further funds for construction purposes, it was necessary to make the greatest possible use of existing facilities. The problem of providing adequate beds for observation cases was met partially through the use of a limited number of beds in certain bureau hospitals utilized primarily for general medical and surgical cases. To meet the demand for continued treatment beds, the bureau increased the capacity of certain existing hospitals through a slight reduction in the square footage allowance in dormitories and day rooms. This was done with due regard to cubic air space which proper sanitation demands for each patient, and without any noticeable inconvenience or crowding. At the same time, this newly established allowance is still in excess of that adhered to by some of the largest State institutions in the country.

It is doubtful if any bureau activity has received more attention within the past few years than the development of an efficient organization and procedure for handling guardianship cases. The creation of a separate division in the legal service of central office for supervising this activity has gone far in developing that degree of cooperation between guardians, the bureau, and the State courts, which is so essential to the success of this important work. Not only has the bureau exercised the strictest control over the appointment and discharge of guardians, as well as the administration of funds intrusted to them, but it has also rendered material assistance to guardians through the issuance of an account book which contains,

in addition to Federal and State laws, and regulations and instructions of the bureau on guardianship procedure, pages appropriately printed to enable each guardian to keep a detailed record of all receipts, disbursements, investments, and other matters affecting the funds intrusted to him. Final approval of the accounts submitted periodically by guardians is secured from the court by the bureau's attorney assigned to the territory in which the guardian resides, which action has resulted in a material saving in attorneys' fees to the estate of the ward. A legal council composed of outstanding representatives of the American Bar Association was created during the year. To date two conferences have been held by this council, both of which have proven of invaluable aid in enabling the bureau to make proper disposition of guardianship cases. The scope and problems confronting the bureau in carrying out its guardianship activities are developed in detail in another section of this report.

719
Further featuring this year's accomplishments was the satisfactory progress made in the methodical acceleration of the final discharge of all rehabilitation responsibilities extended under the amendment to the World War veterans' act on July 2, 1926, to six months from that date to persons in placement training, and to two years from that date to persons in institutional training. On July 2, 1926, the prospective total training load was but 2,027 cases. By December 31, 1926, all placement and project training cases had been declared rehabilitated or were otherwise terminated, and beginning with January 1, 1927, there were but 612 trainees pursuing standardized courses in educational institutions. At the close of this fiscal year but 238 men were in training, so that the bureau's responsibility for the administration of vocational rehabilitation benefits was practically discharged at that time. Since the beginning of this work in 1918 the bureau has reviewed the eligibility of and registered 334,093 claimants, of which number 179,364 actually entered training; has given vocational advisement, arranged appropriate courses, provided facilities, supplies, and supervision for those who accepted training; and carried to completion and rehabilitation a total of 128,223 veterans to date.

During this as perhaps in no other fiscal year was the bureau able to devote considerable thought and attention to perfecting the administrative procedure and organization in both the central and field offices. This was made possible through a reduction in the load of work handled and the almost complete absence of amendatory legislation involving basic changes in existing law. In medical activities, the falling off in the number of physical examinations required for disability compensation purposes has permitted the giving of more attention to the actual treatment of cases. Similarly, the changing of a large number of disability ratings from a temporary to a permanent basis has eliminated the necessity for reexamining these cases at frequent intervals. It is true that the act of July 2, 1926, contained numerous amendments to the World War veterans' act, but these principally extended the duration of existing benefits or conferred additional ones upon those already receiving some form of veterans' relief. Indicative of the organizational and procedural changes adopted during this year are the following: (a) The complete reorganization of the awards division in central office so that

examiners now handle all phases of each case, including benefits under adjusted compensation; (b) the centralization of the rehabilitation functions in regional offices in the claims and rating boards, to permit the handling of all matters affecting the compensation or rehabilitation rights of a claimant by one group; (c) an extensive system of field supervision of the activities in regional offices by central-office specialists; (d) the establishment of a regional attorney's office in each regional office to handle all legal and guardianship work; (e) the consolidation of Section A of the central board of appeals formerly at Boston, Mass., with Section B at New York; and (f) the establishment of four territorial area offices, with a representative in each to perform such duties as may be ordered by the director, in lieu of five coordination groups.

An analysis of the disbursements made from bureau appropriations during this year discloses that the expenditures for direct benefits to beneficiaries, exclusive of those for vocational training, which decreased approximately 90 per cent, dropped slightly below those for the preceding fiscal year. This condition is the direct result of a material decrease in disbursements from the appropriation "Military and naval insurance," due to the fact that lump-sum payments to the estates of insured veterans reached a normal level during this year. The act of March 4, 1925, authorized lump-sum insurance payments in those cases in which the insured failed to designate a beneficiary within the permitted class or the beneficiary died before the insured or died subsequent thereto but before receiving all of the monthly payments due under the insurance contract. This amendment was passed toward the close of the fiscal year 1925, and as a consequence the full effect was not experienced until the ensuing fiscal period.

The above-mentioned decrease, however, was practically offset by increased disbursements out of the appropriations "Military and naval compensation" and "Adjusted service and dependent pay." The largest increase occurred in the appropriation "Military and naval compensation" by reason of a greater number of active disability awards and the liberalized provisions of amendatory legislation for rating tuberculosis cases, the practical effect of which latter was a material rise in the average value of disability compensation awards. Increased disbursements out of the appropriation "Adjusted service and dependent pay" were likewise the result of new legislation, which among other things, extended the presumption of dependency to certain classes of persons; provided for the payment of \$60 to persons establishing their dependency upon veterans who died in service before July 1, 1919; permitted payments to be made to beneficiaries where applications were made by veterans but not filed until after their deaths; and permitted widows of veterans who died between certain dates to file applications which would have the same force and effect as if they had been made by the veterans.

The disbursement for administrative expenses decreased considerably during this as compared with the preceding fiscal year. Foremost of the factors contributing to this condition were the decrease in rehabilitation activities and the general reduction in expenses through improved methods of organization and closer centralized supervision over the activities at field stations.

NEW LEGISLATION

On July 2, 1926, there was enacted Public No. 448, Sixty-ninth Congress, the most important provisions of which were as follows: (a) Any ex-service person shown to have had a tuberculous disease of a compensable degree, who in the judgment of the director has reached a condition of complete arrest of his disease, shall receive compensation of not less than \$50 per month; (b) persons in placement training on June 30, 1926, may be continued in training until January 1, 1927; (c) persons in institutional training on June 30, 1926, may be continued in training up to two years from the date of this amendatory act; (d) uncollected compensation may be applied to revive canceled or reduced insurance; (e) term insurance may be reinstated or converted until July 2, 1927; (f) where a person has allowed his insurance to lapse and dies before collecting the bonus of \$60 provided by the act of February 24, 1919, the bonus may be used for the purpose of reinstating lapsed insurance; (g) in cases arising in the District of Columbia the director is authorized to suspend payments to any guardian, curator, or conservator, who in his opinion is acting in such a number of cases as to make it impracticable to properly conserve the estates or supervise the persons of the wards; (h) indigent veterans under hospitalization for nonservice connected disabilities may be furnished clothing and prosthetic appliances at Government expense; (i) evidence may be submitted in support of a claim until June 7, 1927, and the time limit for filing a claim may be extended by the director for five years; (j) the pension of a veteran under hospitalization for a nonservice connected disability shall not be subject to deduction for board, maintenance, or any other purpose incident to such hospitalization; (k) the members of the Coast Guard are included among those entitled to apply for insurance; (l) spinal meningitis is included among those diseases conclusively held to be of service origin when developing to a degree of 10 per cent or more prior to January 1, 1925; (m) organic loss of speech is included among those conditions classed as permanent total disability; (n) women who served in United States base hospitals overseas are made eligible for the benefits of the World War veterans' act; and (o) women who served as Army nurses between April 21, 1898, and February 1, 1901, are entitled to hospitalization under the same conditions governing the hospitalization of veterans of wars (other than the World War) participated in by the United States.

On July 3, 1926, there was enacted Public No. 472, Sixty-ninth Congress, amending the World War adjusted compensation act, the most important provisions of which were: (a) In the event a veteran dies after application is made, and before it is filed, it may be filed by any person; (b) a valid application may be filed by a surviving widow where the veteran dies between May 19, 1924, and July 1, 1924; (c) no deductions on account of any indebtedness of the veteran to the United States shall be made from the adjusted-service credit, or from any amounts due under this act; and (d) the director is authorized to issue a duplicate adjusted-service certificate where the original has been lost, or destroyed, or defaced without bad faith upon the part of the person entitled to payment thereon.

On February 11, 1927, Public, No. 600, Sixty-ninth Congress, was passed. This act, in addition to making appropriations for the regular activities of the bureau for the fiscal year ending June 30, 1928, appropriated the sum of \$1,000,000 for additional hospital facilities, which amount represents the previously unappropriated balance of the \$10,000,000, authorized for hospital construction purposes, under Public, No. 587, Sixty-eighth Congress, March 3, 1925.

On March 3, 1927, there was enacted Public, No. 762, Sixty-ninth Congress, which act authorized the director of the Veterans' Bureau to make loans to veterans upon the security of adjusted-service certificates. For the purpose of enabling the director to make such loans from the United States Government life-insurance fund, this same act authorized the Secretary of the Treasury to loan not exceeding \$25,000,000 to this fund with interest at the rate of 4 per cent per annum.

On March 4, 1927, Public, Nos. 784 and 785, Sixty-ninth Congress, were passed. These acts provided for the continued hospitalization in contract facilities of certain bureau beneficiaries at Saranac Lake, N. Y., and Liberty, N. Y.

These acts are printed in full in another section of this report, pages 137-151.

MEDICAL SERVICE

The work of the medical service during the fiscal year ended June 30, 1927, was directed to securing mainly these objectives: The development of a program of new hospital construction and of alteration and expansion of existing bureau hospitals in order to provide adequate facilities for insane beneficiaries; the defining of medical and administrative principles and procedure for the guidance of field officials in applying the provisions of the statutes governing the operation of the bureau, including the important amendatory legislation of July 2, 1926; the supervision of medical organization and methods in bureau hospitals, regional offices, suboffices, and medical-treatment stations, so as to secure uniform conceptions and practices aimed at a realization of the ideal of furnishing promptly and skillfully to bureau beneficiaries humane medical care and treatment of a high standard.

Preparation of field instructions interpretative of the amendment of July 2, 1926, to section 202 (7) of the World War veterans' act, providing a statutory award of not less than \$50 for arrested tuberculosis, required consideration of numerous and complex medical and administrative questions. While emphasizing the necessity of determining that tuberculosis actually existed in the individual case, to meet the evident intent of Congress that the statutory award of \$50 per month, payable for life, should not be made where tuberculosis had not in fact existed, the interpretative regulation was in general designed in the usual liberal spirit of the bureau to its beneficiaries. That the field instructions were worked out in a sufficiently clear and readily applicable way is indicated by the rapid handling of claims for benefits under this new provision of law. As of June 30, 1927, less than a year after enactment of the provision, a total of 31,185 statutory awards of not less than \$50 per month for arrested tuberculosis had been allowed.

On March 1, 1927, a postgraduate course of 30 days in neuropsychiatry was begun at the United States veterans' hospital, Bronx, New York City. The curriculum embraced studies in the anatomy, physiology, and pathology of the nervous system, clinical psychiatry, regional diagnosis of brain and spinal cord, laboratory methods, and cooperation between regional offices and hospitals in social work and other adjustment problems arising in discharged psychotic patients.

In the annual report of the bureau for the fiscal year 1926 mention was made of the encouragement of affiliation of the bureau's physicians and dentists with their respective State and local medical organizations. There has been a gratifying extension of such profitable professional relations during this year. County medical societies, branches of the American Medical Association, have met quite frequently in the bureau's hospitals, the programs being arranged by the clinical directors of the hospitals to present papers by staff

members. General discussion by the visiting physicians followed. In this way the bureau's physicians are kept in touch with their fellow professional men and with modern viewpoints in medicine, while the visiting physicians are given an opportunity to inspect the actual conditions under which the bureau is affording relief to its beneficiaries.

Through a special appropriation of Congress to insure suitable displays by different branches of the National Government, the medical service was able to provide an interesting exhibit at the Sesqui-centennial Exposition in Philadelphia, particularly illustrating the scope and value of occupational therapy in the bureau's hospitals. A more technical and very creditable exhibit of the medical service, consisting of pathological specimens, slides, and photographs, was given generous space at the annual convention of the American Medical Association held in Washington, D. C., May 17-20, 1927.

In tuberculosis hospitals located in the North the possibilities of the use of heliotherapy (i. e., treatment by exposure of the body to direct sunlight) have heretofore been largely reduced by reason of frequently prevailing cold or inclement weather. While solaria contribute to the comfort and well being of patients because of their sheltered yet cheerful aspect, these sun parlors can not compensate for the deprivation of the direct solar rays, because ordinary window glass excludes the ultra-violet rays of the sun. These rays are of peculiar therapeutic value in stimulating growth and nutrition, a recognition of which demonstrated fact has led to the substitution for direct solar rays of artificial sources of actinic rays, such as the quartz generator. There has recently been marketed a patented window glass which is permeable, it is claimed, to about one-half of the ultra-violet radiation of the sun. The installation of this glass in the bureau hospital at Sunmount, in the Adirondacks, as purposed, will insure a solarium in a true sense. It is further contemplated to use this glass in other bureau hospitals where indicated.

In this and in other ways suggested by careful, systematic study of clinical results, the medical service is constantly on the alert to maintain the bureau's hospitals at the highest possible level of efficiency. One of the most gratifying evidences of successful realization of this professional ideal was the approval of all of the 50 bureau hospitals by the American College of Surgeons on May 14, 1927, as conforming to the rigid requirements of that medical organization.

The facilities for examination and treatment of bureau patients in the dispensaries attached to regional offices are also well organized in both clinical and laboratory aspects. The variety and flexibility of the therapeutic resources of the bureau in its hospitals and regional offices—comprising, besides the usual medical and surgical resources of the regular school of medicine, the services of specialists, massage, mechanotherapy, electrotherapy, radium, etc.—is such that the bureau's patients are assured of the employment of the most modern treatment methods approved by the regular school of medicine.

Two meetings of the medical council of the bureau were held in the central office, Washington, D. C., the first, November 8 and 9, 1926, and the second, May 12 to 14, 1927. Among the subjects considered by the various special groups of the council were maintenance of professional standards in the medical personnel of the bureau; ap-

proval of a medical corps organization, similar to that of the United States Army, Navy, and Public Health Service; creation of wards for psychiatric patients in general hospitals; measures to secure proper discipline of patients in hospitals; advisory opinions on classification of certain diseases and injuries; the relation of general paralysis of the insane to trauma; emergencies in tuberculous patients justifying hospitalization rather than out-patient treatment; installation of a system of records for out-patient service; X-ray terminology; ratio of nursing personnel to patients in hospitals; duties of part-time physicians in regional offices, etc. It will be appreciated, from these representative topics, that the medical council renders valuable advisory aid to the bureau in determining policy and procedure that reflects the best professional knowledge and judgment in the country.

Work is progressing upon a uniform nomenclature for general medical and surgical diseases for use of hospital and regional medical examiners, to supplement the already adopted classification of the psychoses by the American Psychiatric Association and of pulmonary tuberculosis by the American Sanatorium Association. This uniform nomenclature will not only greatly improve and simplify the collection and study of statistical data, but will make for more expedition and accuracy in the description of diseases and injuries and in the visualization and evaluation of disability therefrom.

RESEARCH

The medical research work of the bureau is supervised by a small organization established in the medical service of central office. The functions of this agency, broadly speaking, are the study of methods of examinations, both clinical and laboratory, and of treatment, in hospitals and dispensaries of the bureau, with the purpose of measuring progress in results and of developing and applying improved methods. Statistical and analytical studies made by this agency appear from time to time in the Medical Bulletin, the interesting and valuable monthly publication of the medical service. Results of studies are also published in separate pamphlets, bearing upon such subjects as standardization of the technic of tests, recent therapy, diagnostic criteria, nomenclature of disease, etc.

Encouragement has been given in this as in the preceding fiscal year to the development of research work in general throughout the service. During this year no less than 61 separate research problems were completed by hospitals, field stations, and central office. Indicative of the diversified character of these studies are the following: (a) Psychometric studies as an aid in the diagnosis and in the prognosis of mental diseases; (b) red blood cell sedimentation rate in the psychoses; (c) comparative study of the colloidal mastic and the colloidal gold test in cerebrospinal fluid; (d) etiological factors of chronic myocarditis in the psychoneurotics; (e) treatment of neurosyphilis by means of rat-bite fever; (f) X-ray findings and combination chest conditions of chronic gassed cases versus tuberculosis; (g) the treatment of chronic amebic dysentery and ameba carriers with stovarsol; (h) studies on pathology of intestinal tuberculosis; (i) the autogenous bone graft in the treatment of ununited fractures; and (j) neuropsychiatric problems among negroes.

In the preceding annual report it was stated that the plan was contemplated whereby an easily accessible master record summarizing the entire past medical history and treatment given any individual claimant would be available at whatever field station the patient presented himself for examination or relief. This plan was carried out during this year by the introduction of medical service Form 2654, "Medical summary." By its use the salient medical facts are recorded in a quickly assimilable way, thereby avoiding the necessity of obtaining and reviewing voluminous and cumbersome case files in order to ascertain diagnostic and therapeutic data.

A board of medical officers, appointed by the director to make a study of the residual effects of war gases, is now engaged in reviewing the histories of bureau beneficiaries for the formulation of a report on this subject.

The cardiovascular data which were obtained by means of a questionnaire issued to the field have now been compiled and incorporated in a manuscript entitled "Heart Disease Among Ex-Service Men." This paper is now being reviewed by Dr. Alfred E. Cohn, of the medical council of the bureau, preparatory to being published. Doctor Cohn, who is on the staff of the Rockefeller Institute, New York City, has an international reputation in this field. The results of this study, it is confidently expected, will be of decided practical value to the bureau.

Excellent results have been achieved with the malarial treatment of neurosyphilis. Reports on this subject have been published in the Medical Bulletin of the bureau, and a paper is now being prepared for publication in the Journal of Nervous and Mental Diseases.

Upon the request of the American College of Surgeons, there has been initiated an analysis of 61 bureau cases of bone sarcoma. This will make a most interesting clinical and pathological study of this variety of neoplasm and will stimulate the early diagnosis and treatment of malignant tumors in beneficiaries.

Work is proceeding in the compilation and analysis of data on artificial pneumothorax therapy, and it is planned to publish the results in the bureau's Medical Bulletin in the near future.

During this year a course in bacteriology, serology, and chemistry was given at the postgraduate school of neuropsychiatry in the bureau's hospital, Bronx, N. Y. This course consisted of 15 hours of laboratory demonstrations and lectures.

REGIONAL OFFICES AND ALLIED FIELD STATIONS

The bureau maintains 54 regional offices—2 in the States of New York, Pennsylvania, Ohio, Missouri, California, and Texas; 1 in the District of Columbia; and 1 in each of the other States, except Delaware. The medical facilities, clinical and laboratory, available at these regional offices are of a proportion and character best adapted to the patient load requirements of the communities served by them.

In addition there are five suboffices located within the continental limits of the United States and three in the Territories and insular possessions; namely, Honolulu, Hawaii; San Juan, Porto Rico; and Manila, P. I. There are also 37 medical-treatment stations operated by the bureau at convenient points throughout the United States.

The medical service rendered in regional offices, suboffices, and medical-treatment stations consists in general of responsibility for physical and mental examinations, including examinations by specialists, and the provision of medical and dental care and treatment, including out-patient and hospital attendance, aftercare, follow-up nursing, and social work, the furnishing of medicine, medical supplies, orthopedic and prosthetic appliances, etc. Physicians serve in regional offices as medical members of regional rating boards engaged in the rating of disability for compensation and insurance.

Radiating out from these field stations and under the supervision of the regional medical officers is the highly developed medical service which is carried to the bureau beneficiary in his home. This is accomplished through house visits of traveling follow-up nurses and social workers operating under and in cooperation with medical officers in charge of hospitals and the regional medical officers. When a patient discharged from a hospital is determined to be in need of aftercare and observation, he not only is given this attention but he and his family receive advice as to sanitary and medical precautions, and an organized effort is made to secure full social and industrial rehabilitation of the patient. If his condition is such that he can not travel to a field station for medical advice or aid, the services of designated physicians in his community are authorized, and he secures any drugs, dressings, other supplies, nursing or emergency, etc., which are necessary and to which he is entitled.

Besides the regular load of physical examinations these field stations have an additional load through the utilization of these facilities for purposes of other Federal departments. Physical examinations are made for the Pension Bureau of applicants for retirement, because of disability, from the classified civil service; of trainees applying for civil-service positions; of pensioners for the Pension Bureau; of applicants for and employees in the Federal classified service, as requested by the Civil Service Commission or its authorized representatives, such as the Post Office Department. Physical examinations are also made and treatment rendered beneficiaries of the United States Employees' Compensation Commission; and, through a reciprocal arrangement with the Dominion of Canada and provisional agreement with other countries that were allied with American forces in the World War, examinations and treatments are rendered foreign ex-service men resident in American territory.

A heavy extra increment of physical examinations made for purposes of reinstatement or conversion of insurance prior to the closing date of July 2, 1927, eventuated during the last quarter of this fiscal year, reaching its peak, as was anticipated, in the final month, June, 1927. Also a considerable number of reexaminations were required at first in connection with assignments of statutory awards of not less than \$50 per month for arrested tuberculosis, as provided in the amendment to section 202 (7), of July 2, 1926. Later these reexaminations were dispensed with, resulting in an appreciable saving in administrative expense. Nevertheless the total number of physical examinations made at these stations decreased from 936,744 for the fiscal year 1926 to 922,364 during this fiscal year. This decrease is largely attributable to the bureau's consistently pursued policy of placing on a permanent rating basis as many beneficiaries in receipt

of compensation for disability as is possible. Beneficiaries on permanent disability ratings are not scheduled for periodic reexaminations as in the case of ratings for temporary disability.

DIAGNOSTIC CENTERS

During the fiscal year of 1927 the bureau operated two diagnostic centers, authorized to determine the complete and final diagnosis and proper treatment of cases which had been the subject of medical controversy or in which satisfactory conclusions had not been reached, although every facility of the bureau's hospitals and regional offices had been exhausted.

There were 1,117 admissions to the United States Veterans' Bureau diagnostic center, Washington, D. C., and 617 to the bureau's diagnostic unit located in the Cincinnati General Hospital, Cincinnati, Ohio, which hospital is under contract with the bureau, although the unit itself is staffed by bureau personnel. Of the 1,734 total admissions 1,432, patients had previously been under hospitalization by the United States Veterans' Bureau one or more times. On June 30, 1927, the combined patient population of the diagnostic centers was 181 patients, consisting of 15 females, 157 white males, and 9 colored males.

During the year there were 1,102 patients discharged from the United States Veterans' Bureau diagnostic center, Washington, D. C., after an average period of hospitalization of 49.6 days, and 615 patients from the Cincinnati diagnostic unit after an average observation period of 13.7 days. The comparatively high average period of hospitalization in the United States Veterans' Bureau diagnostic center, Washington, D. C., is partly the result of administering special treatment in conjunction with observation and examination in some of the more difficult medical and surgical cases in the new treatment unit, which was added as an adjunct to the clinic during the fiscal year. There were 157 surgical operations performed in the United States Veterans' Bureau diagnostic center, Washington, D. C., 50 of which were major and 107 minor. The comprehensive character of the diagnostic work of the United States Veterans' Bureau diagnostic center is apparent from a review of the diagnoses made for the year's 1,102 discharged patients. There were 9,128 diagnoses made, 2,729 of which were for major diseases or conditions and 6,399 minor ones, averaging 8 diagnoses per patient. The diagnoses on discharge were 8,408 in excess of the admission diagnoses.

A measure of the actual accomplishment of these diagnostic centers is determined by the use made, and the success obtained through the use of the clinical findings and the treatments outlined by the diagnostic center in the subsequent hospitalizations. Periodic studies have been made during the year showing the subsequent action taken on the recommendations made by the clinic, those where further treatment was not recommended and those where further treatment was recommended. An analysis of the cases where further treatment was not recommended revealed most gratifying results, for although in many cases the period of time elapsing since the patient was discharged from the hospital with no further treatment indicated was approximately six months, only 18 per cent had returned at the close

of the fiscal year. This fact is particularly significant when it is considered that these patients had had from 1 to 15 previous hospital episodes, which is evidence that the economy which was sought in eliminating unnecessary hospitalizations, travel from one institution to another, and excessive consultation fees which might otherwise be incurred is being effected concurrently with the giving of general satisfaction to the claimants themselves. Where claims and rating boards had available the findings of the diagnostic centers, changes in rating status of 56 per cent of the awards were effected, resulting in increased ratings in 85 per cent of the cases and decreased ratings in the remaining 15 per cent. In those cases where the veteran returned to the hospital within a month, although no further treatment was recommended, the diagnostic clinic's findings were available in all instances, and in 60 per cent of the cases treatment was instituted without the delay occasioned by further diagnostic work. An analysis of those cases where further treatment was recommended revealed that in 75 per cent of the cases the clinic's diagnoses were used. The diagnostic center at Washington, D. C., besides its usefulness in establishing a diagnosis in problem cases, and outlining methods of treatment, has been used during the year as a training school for selected medical officers to fit them for special work. Intensive special training has also been given the bureau nurses at this center.

During this fiscal year there was added to the diagnostic center at Washington, D. C., a new modern clinical building, housing pathological and research units, and a well-equipped laboratory. This permitted the transfer of the bureau's pathological unit from the Army Medical Museum.

BUREAU HOSPITALS FOR GENERAL MEDICAL AND SURGICAL PATIENTS

The number of general medical and surgical patients in bureau hospitals increased materially during this year, due entirely to the increased load of patients with nonservice connected disabilities. If the same rate of increase occurs during the ensuing fiscal year, it may be necessary at certain of the more popular bureau hospitals of this type to limit the admissions of nonservice connected cases, although it is believed that the total Government beds of this type will be ample for both the service and nonservice connected cases.

During this year there was inaugurated the policy of utilizing a limited number of beds in general hospitals for psychotic cases. These special facilities are not intended for continued treatment purposes but rather for observation cases, or those presumably requiring but short hospital episodes. This necessity was forced by reason of the growing demand for accommodations for neuropsychiatric patients, especially the insane. The additions and alterations for this purpose, intended to serve special community needs, have been made and will continue to be made at the bureau's general medical and surgical hospitals at Lake City, Fla.; Memphis, Tenn.; Muskogee, Okla.; Jefferson Barracks and Kansas City, Mo.

The opening during this year of the new and thoroughly modern bureau hospital at Fort Snelling, Minn., with facilities for 300 gen-

eral medical and surgical, 200 tuberculosis, and 40 neuropsychiatric patients, made it possible to discontinue the leased hospital in St. Paul.

The bureau has initiated at the Fort Snelling hospital a plan looking toward the closer affiliation of regional office and hospital activities. Fort Snelling is the only place where these two activities are under the same roof. It was found practical to so augment the out-patient facilities operated at bureau hospitals as to permit the carrying on of the out-patient treatment activities of the regional offices. This being so, it would seem but a logical and wholly proper step to consider the combination of certain administrative functions of these two activities, such as disbursing, auditing, the requisitioning and control of supplies, etc. It is hoped that this innovation in operating procedure at Fort Snelling will be successful and form a basis for possible combination in other localities.

Because of the alarming flood conditions in the lower Mississippi Valley, temporary evacuation of the bureau hospital at Algiers, La. (directly across the river from New Orleans), was begun April 28, 1927. By May 4, 1927, all patients had been safely removed. It was possible to parole about 100 patients and to transfer the remainder to other bureau hospitals located in the South. After subsidence of the flood, the hospital was reopened with a reduced bed capacity.

In the Edward Hines Junior Hospital, Maywood, Ill., thoroughly modern facilities for deep X-ray treatment were installed, which are available for beneficiaries referred from other hospitals and field offices of the bureau. Heretofore this therapy was done under contract at considerable inconvenience and expense.

BUREAU HOSPITALS FOR TUBERCULOSIS PATIENTS

A consistent decrease in the total of admissions of tuberculous beneficiaries to hospitals has been noted during this fiscal year, so that there has been no difficulty in supplying beds for all classes of patients. Moreover, it has been possible still further to reduce the number of patients with service connected tuberculosis in contract (civil) hospitals by transferring approximately 300 patients to Government facilities. The administrative problem as regards the hospital treatment of tuberculosis is therefore at the present time not a question of more beds as a whole, but rather of more infirmary beds. The tuberculosis patients now being admitted to the hospitals under control and jurisdiction of the bureau are tending more to the bed rather than to the ambulatory type, so that existing facilities will have to be readjusted to provide more infirmary accommodations.

During this year 159 permanent beds were erected at the expense of this bureau and opened for patients at the National Home for Disabled Volunteer Soldiers, Hot Springs, S. Dak. The available tuberculous beds in bureau hospitals were reduced through the closing of the leased hospital at West Haven, Conn., and the dismantling of certain of the temporary cantonment type facilities at Oteen, N. C.

Steady attention has been given, with the valuable advisory aid of the nationally recognized specialists of the tuberculosis group of the medical council of the bureau, to still further improvement of the already high-grade medical attention given the bureau's tuberculosis

beneficiaries. All modern and approved methods of diagnosis and treatment are employed, including performance of artificial pneumothorax and heliotherapy. The proposed installation of window glass permeable to the ultraviolet rays of the sun in solaria attached to the bureau's hospitals has elsewhere been discussed in this report. The bureau's results of treatment compare favorably with those of tuberculosis sanatoria in general, notwithstanding the fact that the bureau, unlike many civilian institutions, does not attempt to select the type of patient received for treatment in its hospitals, but admits instead patients in every stage of the disease, including "terminal cases." However, it is but fair to point out that the comparatively good results of the bureau, even in the face of this disadvantageous circumstance, may be attributed to the freedom from economic worries that a bureau beneficiary has. If his admission to hospital was under section 202 (10) of the World War veterans' act, 1924, as amended—i. e., if his tuberculosis is not determined as incurred in or aggravated by service—he does not receive compensation during his hospitalization, it is true, but he is provided with all the necessary treatment at no expense to himself and is thereby saved the cost of hospital bed and board and physicians' bills, which are recognized to-day as one of the severest drains upon the average wage earner's income. This saving is especially beneficial by reason of the usual long period of hospitalization required for persons ill from tuberculosis. If a bureau patient has tuberculosis that is attributable to military service, he receives not only the benefits of hospitalization, no matter how necessarily prolonged, under the best obtainable conditions, without cost to him, but he is also paid compensation of \$80 per month, with additional allowances for dependents if his condition is rated on a temporary disability basis, or \$100 per month, with insurance benefits besides (if insurance is in effect) when the rating is for permanent disability. The average wage earner, particularly one with a dependent family, often can not afford to stay as long in a civilian hospital as his condition would really require. His enforced discharge predisposes him to a recurrence of activity of the process, thereby creating a vicious circle. A bureau beneficiary, freed by generous provisions of Congress from such economic worry, is able to stay in a hospital as long as the hospital staff advises, and it is the practice to continue hospitalization longer than in civilian sanatoria, so as to be assured of firm reparative process. When arrest of activity is reached graduated exercises are begun, so as to observe the individual reaction to conditions approximating those which the patient will encounter upon discharge. If these exercises cause no respiratory or cardiac embarrassment and there is no reappearance of fever or other systemic evidences indicative of imperfect repair of the tuberculous process, discharge is effected. But after return home the patient is kept under the observation and supervision of follow-up nurses and tuberculosis specialists in the regional offices, so that everything is done to obviate recurrence of the disease or to provide prompt rehospitalization if necessary. Moreover, by the provisions of section 202 (2) of the World War veterans' act, 1924, a bureau patient with service-connected tuberculosis who is discharged from hospital as "arrested" receives for six months after such discharge an award of compensation based upon temporary total disability—i. e., \$80 per

month. This financial assistance further reduces the probability of inviting reactivation of tuberculosis through overwork of the patient in the critical period of industrial readjustment immediately following dehospitalization.

BUREAU HOSPITALS FOR NEUROPSYCHIATRIC PATIENTS

The demand for hospital beds created by applicants with non-service connected disabilities under the liberal provisions of section 202 (10) of the World War veterans' act, 1924, as amended, has been met, so far as the bureau's hospitals for tuberculous and for general medical and surgical patients are concerned without any particular difficulty. There is, however, a perceptible trend downward of the hospital load for these two types of patients, as compared with a decided increase in applications for neuropsychiatric accommodations, especially for the frankly psychotic. To meet the demand for neuropsychiatric beds, special facilities for mental patients have been provided in certain general hospitals, and there has been such readjustment of ward space in existing bureau hospitals for neuropsychiatric patients as was warranted by minimum cubic air bed space per patient and other sanitary necessities. Notwithstanding these measures, however, the problem of supplying neuropsychiatric beds for applicants under section 202 (10) of the act continues to be acute and demands constant administrative vigilance. It is manifestly the primary duty of the bureau, in disposing of applications for beds, to consider first of all those insane veterans whose condition is service connected. When the needs of beneficiaries whose insanity is held as incurred in or aggravated by military service have been fully supplied, the bureau is then prepared to take care of nonservice applicants to the extent of remaining facilities, and with required recognition of a small emergency reservation of beds. It is to be kept in mind that veterans applying for hospitalization for nonservice connected disabilities are, as citizens of their respective communities, entitled to treatment in their State hospitals, so that whenever it is impossible for the bureau to hospitalize such applicants they are not wholly deprived of required relief.

Another remedial measure intended to insure a flexible, adequate bed supply, based upon existing facilities, has been taken through instructions to field offices to determine properly the actual need for hospital treatment of applicants. Whenever indicated, out-patient treatment through the suitably equipped regional office dispensaries is given instead for patients with service-connected disorders of the nervous system. Out-patient treatment, instead of hospitalization, is, in the opinion of the medical profession, better adapted for the so-called "functional nervous diseases," such as the psychoneuroses—i. e., hysteria, neurasthenia, and psychasthenia—and patients suffering from these functional conditions are hospitalized only for purposes of observation or for short periods of intensive treatment. Other types of chronic neurological disorders, which are intractable to treatment and which require only ordinary care or custodial attention, are referred to National Homes for Disabled Volunteer Soldiers.

The satisfactory functioning of the new social work of the bureau, recently organized and steadily being perfected, has further contrib-

uted to easing the situation created by the increased demand for beds for insane patients. Parole of these patients from hospitals under the control and jurisdiction of the bureau has been encouraged. When returned to their home communities consistent organized effort is then made, through the activities of the bureau's social workers and through trained neuropsychiatrists in the regional offices, co-operating with the families and friends of these patients, to get them adjusted socially and economically, thereby effecting the desired end of preventing rehospitalization, which tends to break down the initiative of the patient and thus to prevent his social rehabilitation. While the primary object of this endeavor is to assist these patients to make true social recoveries, the accomplishment of this main purpose in turn results in hospital beds for other insane patients.

Reference has previously been made to the matter of providing limited accommodations for neuropsychiatric patients in general hospitals, primarily to meet community emergencies and for periods of observation and examination. However, these added accommodations are adapted for temporary periods of treatment. In short, the purpose was to create facilities corresponding to the psychopathic pavilions or "clearing hospitals" maintained by States and cities in municipal centers serving large metropolitan areas. If after study, both clinical and laboratory, it is determined by the medical staffs in these recently created wards for neuropsychiatric patients in the bureau's general hospitals that the individual patient has a recoverable condition, he may be retained until improved or wholly recovered. On the other hand, if his condition is diagnosticated as chronic or deteriorating in type, he will be transferred to some other bureau hospital better adapted for continued treatment.

Additional beds were constructed and opened for patients during this period in the bureau hospital at North Chicago, Ill., while others were obtained through a reallocation of the ward space and minor alterations in the bureau hospitals at Knoxville, Iowa, and the Bronx, New York City.

In certain of the neuropsychiatric hospitals farm activities have been splendidly developed, so that triple advantages have resulted in that (a) the patients have been provided with a practical interesting form of occupational therapy, capable of effecting great mental and physical improvement, which is the main object sought; (b) their dietary has been correspondingly varied and improved by the addition of fresh fruits, vegetables and berries, milk, butter, eggs, poultry, and meat; and (c) an economy in costs of food products, as compared with market prices of these commodities, has been realized.

Hospitals under the control and jurisdiction of the United States Veterans' Bureau are not institutions authorized to retain indefinitely or indiscriminately psychotic patients against their own wishes or the expressed desires of their guardians, nearest relatives, or other responsible persons. Beneficiaries committed for lunacy by a court of competent jurisdiction will be accepted for treatment in a bureau hospital only when the action is in the best interests of the veteran and the community. When release from a bureau hospital is requested by or in behalf of a psychotic beneficiary not legally committed,

the medical officer in charge is instructed to communicate immediately with the guardian, next of kin, or other responsible person concerned, at whose instance the patient was accepted for treatment. In this communication the patient's mental condition is stated, with advice whether or not release from hospital would be in the interest of the patient; it is also developed whether, if release is effected, the responsible person will assume charge of the patient and be responsible for his subsequent care. If the guardian or other responsible person accepts these necessary protective conditions for the patient, he is promptly discharged from hospital. If the guardian or other responsible person refuses acceptance of responsibility and the patient insists upon discharge, the regional attorney of the bureau in the State in which the patient has legal residence, as well as the proper civil authorities thereof, are notified of the patient's request for discharge and informed that it is the policy of the bureau to effect discharge under such circumstances, as the bureau is without legal authority to retain the patient in view of the fact that he has not been committed to the hospital by a court of competent jurisdiction. When suitable arrangements have been made in the patient's home community for his subsequent custody or treatment, the medical officer in charge of the bureau hospital will promptly discharge the patient and will return him, with any necessary attendance, to his home, there to be turned over to the proper local authorities.

To those persons who share the widely prevalent opinion that all insanities are essentially nonrecoverable in type and that little can be accomplished for an insane patient other than making a lifetime residence in hospital as comfortable for him as possible, the report of a representative bureau hospital—that in the Borough of the Bronx, New York City—will be illuminating. This hospital, serving particularly a congested metropolitan area, has passed, since its opening, April 17, 1922, 10,100 patients through its clinical department. Of this total, 5,300 were inpatients, the remainder being treated in the out-patient clinic of the hospital. Of the hospitalized, or inpatient group, over 4,500 patients were eventually discharged, the great majority of whom were so improved as to return to their social environment and resume industrial occupations.

As illustrating the volume and character of the medical service rendered such beneficiaries it may be stated that in the Bronx hospital during this fiscal year approximately 600 individual consultations have been rendered by the consulting staff, composed of New York City specialists of national reputation, in addition to the regular staff consultations and conferences at which all aspects of an individual's condition are thoroughly discussed. Numerous surgical operations were performed for relief of associated diseases which interfere with recovery from the basic mental condition of patients. Besides the many eye, ear, nose, and throat examinations, 14,124 exposures of X-ray plates were made and 5,213 dental treatments rendered. The department of medical psychology made 669 psychological and psychoneurotic examinations. In addition, the fact that 12,000 clinical laboratory procedures were completed during the fiscal year will indicate the thorough study of individual patients that is the prevailing practice in the bureau's hospitals. The total of 5,300 "house" patients included a great variety of mental and neurological dis-

orders, requiring for their proper diagnosis and treatment a high degree of scientific skill in the medical staff. The modern treatment of general paralysis of the insane by malarial inoculations as employed in the bureau's hospital during this fiscal year has given promising results that merit its continuance on a still wider scale. Patients suffering from encephalitis have been given dextrose, intravenously. Other groups have received typhoid vaccine, hypodermically, or intravenously. In short, every form of approved treatment—e. g., drugs, biochemical reactions, physiotherapy, occupational therapy, corrective habit-forming classes for deteriorating psychotics, etc.—is used, thereby insuring the patients of the bureau the best and most modern medical attention that can be supplied.

Nor does this conscientious concern for the individual patient's welfare stop at his discharge from hospital. Before discharge is effected, the staff in conference, and upon the basis of information obtained by a bureau social worker relative to the home environment, considers the probable life activities of the patient after he will be discharged. Ordinarily, patients who have been suffering from a mental disorder are "paroled" or put on "trial visit," for a period of three months, in the custody of the guardian, relative, or friend. In this way is provided a definite, approved domicile, with adequate supervision, promoting the possibility of a satisfactory social and economic readjustment. A follow-up and contact service is maintained with the patient, after discharge from hospital, by the social worker and the chief of the neuropsychiatric division in the regional office of the territory where the patient resides. The hospital head is kept informed of how the patient is progressing, and appropriate action, looking either to advice of the return of the patient to hospital or formal discharge at the end of the parole period, is taken in accordance with this information.

EXPENDITURES AND OPERATING COSTS AT UNITED STATES VETERANS' HOSPITALS

Gross expenditures at bureau hospitals during this year amounted to \$30,011,676.31, or \$176,561.58 less than the sum expended for the preceding fiscal year; while the net operating expenses totaled \$25,282,430.87, or a decrease of \$39,122.89 over the previous year. The amount shown for net operating expenses does not include expenditures for new construction, nonexpendable equipment, or those incident to the furnishing of out-patient relief. Throughout this fiscal period there was a daily average of 740 more patients of all types under treatment than for the preceding fiscal year. The average per diem rate for all hospitals decreased from \$4.19 in 1926 to \$4 for this year.

The cost of operating hospitals used principally for tuberculous patients decreased \$617,774.81 during this as compared with the fiscal year 1926, due primarily to the closing of one leased hospital and the general decline in the patient load of this type. During this year these hospitals cared for a daily average of 297 less patients than in 1926, while the per diem cost of operation was \$0.01 less for this year. At hospitals of the neuropsychiatric type there was an increase of \$563,343.49 in operating expenses, the direct result of a daily average

of 875 more patients than in 1926. The per diem cost of operation for these hospitals during this year was \$2.83, a decrease of \$0.14 over that for 1926. The cost of operating hospitals of the general medical and surgical type decreased but slightly during this as compared with the fiscal year 1926. There was, however, a daily average of 153 more patients during this year, which condition is primarily responsible for the material reduction of \$0.18 in the average per diem rate.

GOVERNMENT HOSPITAL FACILITIES

On July 1, 1926, the 51 hospitals operated by this bureau provided a total of 20,598 available beds. These beds, classified as to type for which each hospital was principally used, were as follows: Tuberculosis, 7,313; neuropsychiatric, 8,051; and general medical and surgical, 5,234. On June 30, 1927, there were 50 bureau hospitals in operation and a total of 20,762 available beds. In other words, the total available beds increased 164, notwithstanding the fact that at the expiration of this year there was one hospital less in operation. Of greater importance, however, than this relatively slight increase in total beds is the increase that occurred in the number of beds in permanent Government-owned structures. At the beginning of this year there were 16,824 beds in buildings of permanent construction, as compared with 18,026 at the close thereof. During this same period the number of beds in leased facilities decreased from 1,750 to 1,219.

The only new veterans' hospital opened during this period was at Fort Snelling, Minn., although the bureau did purchase and operate as a part of its main hospital at Muskogee, Okla., the former city hospital at that location. The bureau also transferred its hospital activities in Kansas City, Mo., from one leased building to another. Additional beds were erected and opened for patients in the veterans' hospital at North Chicago, Ill., while others were acquired through a reallocation of space and minor alterations in the veterans' hospitals at Knoxville, Iowa, and the Bronx, New York City. One hundred and fifty-nine permanent beds were also erected at the expense of the bureau and opened for patients at the National Home for Disabled Volunteer Soldiers, Hot Springs, S. Dak. Two leased hospitals were closed during this period, one at West Haven, Conn., and the other at St. Paul, Minn.

The number of beds in bureau tuberculosis hospitals decreased 595 during this period by reason of the closing of the leased hospital at West Haven, Conn., and the dismantling of certain of the temporary facilities at Oteen, N. C. In neuropsychiatric hospitals there was an increase of 519 beds, due principally to the additional facilities erected at North Chicago, Ill., and those acquired through a reallocation of space at Knoxville, Iowa, American Lake, Wash., and the Bronx, New York City. At hospitals of the general medical and surgical type there was a net increase of 240 beds, due wholly to the opening of the new hospital at Fort Snelling, Minn.

In addition to the hospitals operated by this bureau, there was on June 30, 1927, a total of 8,615 beds reserved for beneficiaries of this bureau in hospitals operated by other Government agencies. These beds, classified by individual Government agency, were as follows: National Homes for Disabled Volunteer Soldiers, 2,732; United

States Navy, 2,685; United States Army, 2,587; Interior Department (St. Elizabeths Hospital), 386; and United States Public Health Service, 225. Of the foregoing beds, 2,440 were for tuberculous conditions, 1,870 for neuropsychiatric disorders, and 4,305 for general medical and surgical conditions. In all Government hospitals on June 30, 1927, there was a total of 29,377 beds available to this bureau, as compared with 30,679 at the beginning of this fiscal year, representing a net decrease of 1,302.

FUTURE HOSPITAL CONSTRUCTION

At the expiration of the fiscal year construction work was in progress on the following major projects: (a) 1,000-bed neuropsychiatric hospital at Northport, Long Island; (b) 350-bed neuropsychiatric hospital at Bedford, Mass.; (c) 322 additional neuropsychiatric beds at Palo Alto, Calif.; (d) 165 permanent tuberculosis beds to replace an equal number in temporary structures at Oteen, N. C.; and (e) 300 permanent beds to replace temporary facilities at the United States Army Hospital, Washington, D. C.

In addition to the projects now under construction, the bureau has the necessary funds to accomplish the following approved hospital program: (a) Replacement of the temporary Government-owned tuberculosis facilities at Tucson, Ariz., and Alexandria, La.; (b) erection of a new hospital at Portland, Oreg., to replace the facilities now leased at that location; and (c) erection of facilities at Fargo, N. Dak., to house the regional office activities and also to provide a limited number of hospital beds for observation cases.

The future hospital construction program of the bureau beyond that indicated above is problematical. The hospitalization of veterans for nonservice connected disabilities was authorized under section 202 (10) of the World War veterans' act, 1924, as amended, and this provision of law has materially affected the current hospitalization problems before this bureau. On June 30, 1927, the total hospital load for this class of case was 7,408, of which number 6,550 were veterans of the World War. This load represented 30 per cent of the total hospital population of the bureau on the above-mentioned date, and was distributed by type of disease as follows: Tuberculosis, 2,046; mental, 1,172; nervous, 560; and general medical and surgical, 3,630. The real significance of this load is fully apparent when it is considered that the number of Government beds occupied by these cases is equivalent to the complete utilization of approximately fifteen 500-bed hospitals. Furthermore, it is apparent from an analysis of the trend of this class of case that an even greater demand can be expected during the ensuing fiscal year.

Of the total admissions to all hospitals during the fiscal year 1927, 35,386, or 49 per cent, were admitted for the treatment of nonservice-connected disabilities. The foregoing admissions represent an increase of 46 per cent over those of the preceding fiscal year, and are three times as great as those made during the fiscal year of 1925. The demand for hospital beds created by applicants with nonservice-connected disabilities was met during this year as far as tuberculous and general medical and surgical patients are concerned without any particular difficulty, due to the trend downward of the service-con-

nected loads of these two types. It was necessary, however, to limit the admissions of neuropsychiatric patients of this class to the smallest possible number (mostly emergency), in order that the relatively few additional beds of this type acquired during this year might properly be used for service-connected cases.

In the final analysis it is believed that sufficient Government beds exist to adequately provide for both the service and nonservice connected tuberculous and general medical and surgical patients. There are, however, a few bureau hospitals of these two types that lack certain essential utility buildings and personnel quarters, which it is believed should be provided to round out complete operating institutions. The need for additional beds for neuropsychiatric cases is clearly evident upon consideration of the following factors: (a) The inadequacy of both the existing and planned Government beds to accommodate even the present service-connected load of this type; (b) the relatively slight turnover of this type of case, and the expected gradual increase in the load as the average age of veterans rises; and (c) the fact that nearly all the bureau hospitals of both the tuberculous and general medical and surgical types are unsuitable for conversion to the neuropsychiatric type, by reason of structural deficiencies and other recognized practical disadvantages.

The extent to which additional construction of neuropsychiatric facilities will be recommended to the Congress by the bureau will be dependent upon the degree to which the Congress decides to carry the provision of hospitalizing all veterans suffering from neuropsychiatric conditions not attributable to military service.

Consideration was given at the last session of Congress to the placing of the National Homes for Disabled Volunteer Soldiers under the jurisdiction of this bureau. If this is accomplished, the facilities thus acquired will undoubtedly have a decided influence upon the future hospital construction program of the bureau. It will also present to the bureau for solution an enormous problem that has entirely to do with the domiciliary care of veterans.

DENTAL RELIEF

The number of out-patient dental clinics in operation in regional offices has been reduced during this year from 37 to 32, and the number of dental officers on full and part time duty therein from 64 to 57. This reduction is due primarily to a decrease in the load handled, as well as through better administrative control. During this year dental relief was furnished in out-patient clinics to 15,290 claimants, requiring 72,670 sittings. Dental relief was completed in 6,579 cases at an actual cost of \$210,998.22, or an average cost of \$14.22 per patient. During this same period there was also vouchered to designated dentists, representing dental relief authorized and completed on a fee basis, the sum of \$153,625.

At the end of this year there were 50 clinics in operation at bureau hospitals, which is a decrease of 1 over the previous year. The number of dental officers on duty in these clinics, however, increased from 75 to 77. This increase in number of operators has been caused principally by the transfer of the regional office activities at Minneapolis to the new bureau hospital at Fort Snelling, Minn. Dental relief

rendered in hospital clinics has increased during this year, due partly to the rendering of more adjunct dental relief. A considerable amount of this adjunct relief has been rendered to claimants admitted to hospitals for treatment for nonservice connected disabilities. From September, 1926, the first month reports on this type of relief were available, and for the six months' period ending February 28, 1927, this type of beneficiary represented dental relief completed in the amount of \$86,459.25.

Dental relief was furnished in hospitals during this year to 25,149 claimants, requiring 174,048 sittings. It was completed in 13,543 cases, at an actual cost of \$405,943.61, or an average cost of \$16.32 per patient.

In many of the smaller regional offices the policy of detailing dental officers from other near-by offices a certain number of days each month has been continued, as it has been shown that a saving in salaries has been effected as compared with the cost of travel and per diem allowances.

During this year a marked decrease has been noted in the amount of dental relief being rendered on the basis of service connection for the oral or dental condition. On the other hand, the amount of dental relief rendered as adjunct treatment has increased in both regional offices and hospital clinics, and it is believed that the ensuing fiscal year will witness a still further increase in this class of treatment.

PROSTHETICS

During this year there was a decrease of approximately \$25,000 over the amount expended in 1926 for prosthetic and orthopedic appliances. This reduction has been accomplished by the continued practice of the strictest administrative economy possible consistent with the rendering of efficient and satisfactory service to beneficiaries. Every effort has been extended to secure contracts with reputable dealers throughout the country for furnishing prosthetic appliances and repairs thereto at the lowest possible cost without the sacrifice of first-class quality of material and workmanship. A decrease of approximately \$10,000 has been noted in the amount spent for artificial legs. This has resulted from several causes, the principal being that most beneficiaries have been wearing the appliances a sufficiently long period of time as to become thoroughly familiar with the manipulation of artificial limbs, so that replacements necessary due to accidental breakage or improper use of the apparatus are now infrequent. The bureau has also insisted on adjustments from manufacturers from whom limbs have been purchased that have not given the proper service, due to no fault of the wearer but to faulty construction or material.

The effect of the amendatory legislation of July 2, 1926, which permitted the furnishing of prosthetic appliances to indigent veterans under hospitalization for nonservice-connected disabilities is observed in the fact that of a total increase of \$10,142.77 in expenditures involved in the furnishing of prosthetic relief to hospitalized beneficiaries during this year \$8,348.08 was expended for such beneficiaries.

The bureau has continued to operate orthopedic shops in conjunction with the regional offices at Boston, Mass.; New York, N. Y.;

Atlanta, Ga.; and Chicago, Ill. These shops during this year accomplished a net saving of approximately \$19,500 over the amount it would have cost to have had similar work performed on a contract basis. A small shop with but one general mechanic on duty was opened toward the close of this year in the bureau hospital at Muskogee, Okla.

SOCIAL WORK

In the development of its program of psychiatric social work the bureau has sought the advice and cooperation of outside social agencies, such as social-work departments connected with public and privately supported hospitals for mental diseases, and workers representing various professional organizations, as well as the heads of recognized schools of social work.

The aim of the psychiatric social worker, working under direction of neuropsychiatric specialists, is to assist in the social recovery of the patient, to help him make the best readjustment to his home and community of which he is capable. Individual cases demand various types of service from the social worker to accomplish this end. In many cases the first service required may be the assembling of a social history from interviews with the patient's family, friends, former employers, family physicians, etc., in order that the psychiatrist may have an accurate picture of the patient's heredity, the influences surrounding him through childhood, school days, and adolescence, his pre-war and postwar occupational history, and the events leading up to his examination by the bureau. This detailed analysis is as significant to the psychiatrist as the clinical history of the patient, his physical and X-ray examinations, and laboratory tests in determining the diagnosis and plan of treatment. Since November, 1926, 2,970 complete histories have been secured for the use of the psychiatrist by the personal investigation of the bureau's social workers. In addition, 3,677 supplementary investigations were made during the same period to secure data regarding some special point of importance to the psychiatrists. These reports at the same time show the insight which the family has into the patient's condition and the ability of the family to effect kindly, intelligent supervision of the patient should he be given a trial visit home; they thus furnish a basis on which the physician can determine the advisability of a parole for the individual patient. Upon the social worker in the hospital rests the responsibility for discovering and meeting social problems which are interfering with the satisfactory medical treatment of the patient, or which will aggravate his condition upon his parole or discharge. Some of these problems can be solved by the coordinated efforts of the hospital and regional office workers themselves; others require the careful guidance of a social agency in the patient's home community over a long period. In these latter instances the bureau's social worker acts in a more or less advisory capacity in giving the associated social agency the full interpretation of the patient's problems and the advice of the psychiatrists in the situation. The various social agencies, and particularly the American Red Cross chapters throughout the country, have rendered the most generous cooperation in making their social data in individual cases available to the bureau's social worker and in

helping to meet the social problems which arise during and after the patient's hospitalization. The assistance of local social agencies was secured in meeting the problems of 3,533 bureau patients from November, 1926, to the end of the fiscal year.

Especially in States where the local social agencies are few is the value of the psychiatric social worker attached to the regional office demonstrated. Prior to the appointment of bureau social workers it was frequently impossible to secure any knowledge of home conditions or the onset of the patient's disability; to say nothing of the impossibility of obtaining the type of detailed analysis which the trained psychiatric social worker is prepared to secure, or of maintaining an interested supervision and helpful encouragement toward a normal adjustment during a patient's trial visit or parole home.

The bureau's social worker, when visiting a county in order to secure a social history which has been requested, also, by personal investigation, determines whether minor children living in the vicinity who are wards of the bureau are surrounded by satisfactory living conditions and educational advantages and receiving the full benefit of compensation which the bureau has awarded them on account of the disability or death of their fathers. Similar surveys are made in the cases of incompetent beneficiaries of the bureau, in order that the regional attorney may know whether their interests are fully protected by their guardians. The phase of the work which the bureau desires to develop much more fully is the supervision of the paroled patient. It is the desire of the physicians in the neuro-psychiatric hospitals to parole the patient whenever possible before he becomes "institutionalized," if they can feel assured of satisfactory home conditions and of regular supervision of a psychiatric social worker to interpret the patient to the family, instruct them in mental hygiene principles, encourage their interest and willingness to have the patient at home, assist in finding a suitable occupation adapted to his capacity, and determine whether his trial visit should be extended or whether alarming symptoms are developing which require his reexamination and possible return to hospital.

BUSINESS MANAGEMENT OF HOSPITALS

The agency established in the medical service, central office, to supervise this particular phase of hospital administration, directed its efforts largely during this year to the adoption of more efficient business methods and to economies in the expenditure of funds. Foremost among these were the following:

(1) The standardizing of subsistence supplies furnished to all of the bureau's hospitals; that is, the furnishing of the same variety and quality of staple goods. This has been fully accomplished with approximately 66 items which are purchased centrally, and considerable progress along this line is being made as regards items which are still bought locally by each station. Particularly is this true with reference to meats, meat-food products, butter, eggs, cheese, and poultry. The central purchase of items, in addition to those above mentioned, has not been pushed pending the determination of precisely how satisfactorily the plan was working out in its main features. However, at this time additional items are being added to

those previously purchased with a view to central purchase ultimately of all items which can be so purchased to an advantage.

(2) The raising of quality of subsistence supplies used by all stations, thus insuring better food to all patients as a basis for maximum improvement under treatment. This is being accomplished through the medium of central purchase under standard specifications permitting the furnishing of no goods except those of unquestioned quality. That this objective has been accomplished is evident from reports submitted by bureau hospitals, and from the fact that the prices formerly paid by many of the hospitals for subsistence items were below the lowest market price quoted for a good grade of supply.

(3) The securing of the lowest possible price on subsistence supplies by buying these supplies in large quantities direct from the largest packers, thus eliminating all middlemen's profits. So far as it has been possible to study and compare costs, this practice has resulted in some economy. However, the study of costs has not progressed to a point where the net comparison of costs for the whole field can be stated with confidence. Despite this lack of definite indication of having effected direct economies in the expenditure of funds there have been economies made through the purchase of grades of goods which yield higher percentages of edible food, thereby reducing losses experienced by waste by-products. Further economies have been realized through the control, preparation, and use of food items based on the accepted rate of consumption and the number of rations served over a given period.

(4) The maintenance of high standards of subsistence activities at each hospital through a system of supervision operated from central office. Under this system trained experts visit each station, remaining so long as may be necessary to cover in minute detail all matters entering into the feeding of patients and personnel. Experts travel from one station to another and submit weekly reports, through which central office is able to follow through each matter upon which the supervisor has raised any question or made recommendation. A special effort is being made to see that only the highest quality of meats and meat-food products are delivered to hospitals. In this connection the expert service of the Bureau of Agricultural Economics, United States Department of Agriculture, is being utilized for all hospitals at which this service can be made available.

Further economies were effected during this year through the purchase of subsistence stores which yield the maximum number of rations per unit quantity of the supply and through the reduction of wastage incident to the peeling of potatoes and other vegetables.

HOSPITAL STATISTICS

A series of statistical tables, reviewing the hospital service rendered by the bureau during fiscal year 1927, is given in Tables Nos. 14 to 31. These tables cover the movement of the patient population, showing admissions, turnover, and replacements, the patients remaining under treatment as of June 30, 1927, and the discharges from hospitals. The results accomplished through hospitalization are expressed in terms of results of treatment and surgical intervention.

ADMISSIONS

Since the beginning of hospitalization of the disabled World War veterans by the United States Veterans' Bureau, there have been 634,114 admissions to hospitals for examination, observation, or treatment, 71,967 of which have been made during the past fiscal year. These admissions represent an increase of 2,526 over those of the previous fiscal year. Although eight years have elapsed since the inauguration of hospitalization by the United States Veterans' Bureau, there were 32,025 patients admitted to hospitalization during the year who had never previously been under the bureau's hospital care and treatment. Many of the 5,358 first admissions of veterans for pulmonary tuberculosis were a result of the bureau's effort to determine the existence of true tuberculosis in arrested or apparently arrested cases, in order to carry out the amendment of July 2, 1926, to the World War veterans' act, 1924, section 202, paragraph 7, which provided for a statutory award of \$50 for completely arrested tuberculosis.

The total admissions authorized under the liberalized hospital program effected through section 202, paragraph 10, World War veterans' act, 1924, were 35,386, or 49 per cent of the total hospital admissions. These 35,386 admissions represent an increase of 46 per cent over those of the fiscal year 1926 and are three times as great as those made during the fiscal year 1925. The admission of more than twice as many veterans under the second sentence of section 202, paragraph 10, as under the first one is because most of the tuberculosis and neuropsychiatric veterans, who form the principal beneficiaries under the first sentence, had their disabilities connected with service under the presumptive service connection clause of the World War veterans' act, 1924, as amended. The hospital provisions of the second sentence have been and are continuing to be a great benefit, especially to the World War veterans, 22,439 of whom were granted hospitalization during the year who otherwise would have been denied the privilege. Veterans of wars other than the World War hospitalized under this provision total 3,997; of these 82 per cent were veterans of the Spanish-American War. Under the amendment of July 2, 1926, hospitalization was extended to Civil War veterans, 233 of whom were admitted to hospitals during the fiscal year.

Among the 17,361 veterans admitted for treatment of tuberculosis, it was encouraging to find that 287 of the cases were admitted for pulmonary tuberculosis in its incipency, 90 of whom were first admissions. The splendid effort that is being made to "find" the pulmonary tuberculosis cases while they are in their incipency or early stages of reactivation is seen in the year's 3,067 admissions for observation of pulmonary tuberculosis. The 1,916 cases of far-advanced tuberculosis admitted to first-time hospitalization by the United States Veterans' Bureau are evidence that no attempt to select the type of tuberculosis patients admitted for treatment is made by the bureau. Of the 17,361 admissions, there were 565 made for the treatment of nonpulmonary forms of tuberculosis.

Of the 11,499 admissions of veterans for hospitalization of a neuropsychiatric disability, 4,119 had never been hospitalized by the United States Veterans' Bureau for any disease or condition previous to this

fiscal year. The most important psychiatric disability for which admissions for hospitalization were made was dementia precox. This class of patient formed 52 per cent of the total psychiatric admissions during the fiscal year. General paralysis and manic depressive psychosis are numerically the next two most important specific psychiatric disabilities.

REPLACEMENT AND YEARLY TURNOVER OF PATIENTS IN UNITED STATES
VETERANS' HOSPITALS

The yearly per cent of turnover since 1920 is an excellent index of the stabilization of hospitalization in United States veterans' hospitals, as reported in Table No. 19. A comparison of hospitals doing similar work is accomplished by grouping them according to the principal type of patient treated. The turnover during the fiscal year, for the veterans' institutions treating neuropsychiatric, tuberculosis, and general medical and surgical cases, respectively, are expressed relatively as 0.5, 2, and 6. In 1920 the hospital turnover for tuberculosis hospitals was once every three months, and during the fiscal year 1927 the average hospitalization period was approximately six months, resulting in a complete turnover twice a year. This low rate of turnover is highly desirable among the tuberculous veterans, inasmuch as arrestment of the disease is seldom attained in less than one year of intensive care, treatment, and exercise. In the neuropsychiatric hospitals seven years ago the turnover was approximately once in four months, and not only did this rapid turnover destroy the value of such reconstructive measures as were being made for these veterans but it also interfered with the economical and effective administration of the neuropsychiatric institution. It is therefore most satisfactory to find that this itinerant tendency on the part of the neuropsychiatric patient has been overcome to the extent that during this fiscal year only one-half of the patient population has been replaced, indicating that a complete turnover would require two years. In the United States Veterans' Hospital, Gulfport, Miss., the disproportionately high rate of turnover for a neuropsychiatric hospital is due to the type of neuropsychiatric patient under treatment, the patient population being 20 per cent less psychotic than in any other United States veterans' neuropsychiatric hospital. The average period of hospitalization for the psychotic patient is 462.4 days, whereas that of the veteran with any other neuropsychiatric disability is 78.6 days. In the United States veterans' general medical and surgical hospitals, Lake City, Fla.; Memphis, Tenn.; and Muskogee, Okla., there was a turnover approximately once a month. Each of these institutions have had a newly created neuropsychiatric observation ward designed to meet the community emergency and to relieve the bureau's hospitals devoted to the care and treatment of the frankly psychotic. During the year many observations were made and completed within a 15-day period, and an appreciable number of patients with functional nervous diseases or endocrinopathies were treated and improved in the general medical and surgical hospitals and referred to the regional office for further treatment and supervision. During the year there was an average of 17,500 patients under hospitalization in all vet-

erans' hospitals, the patient population varying from 78 general patients in United States Veterans' Hospital, Atlanta, Ga., to 896 neuropsychiatric veterans in United States Veterans' Hospital, Perry Point, Md.

REMAINING UNDER TREATMENT JUNE 30, 1927

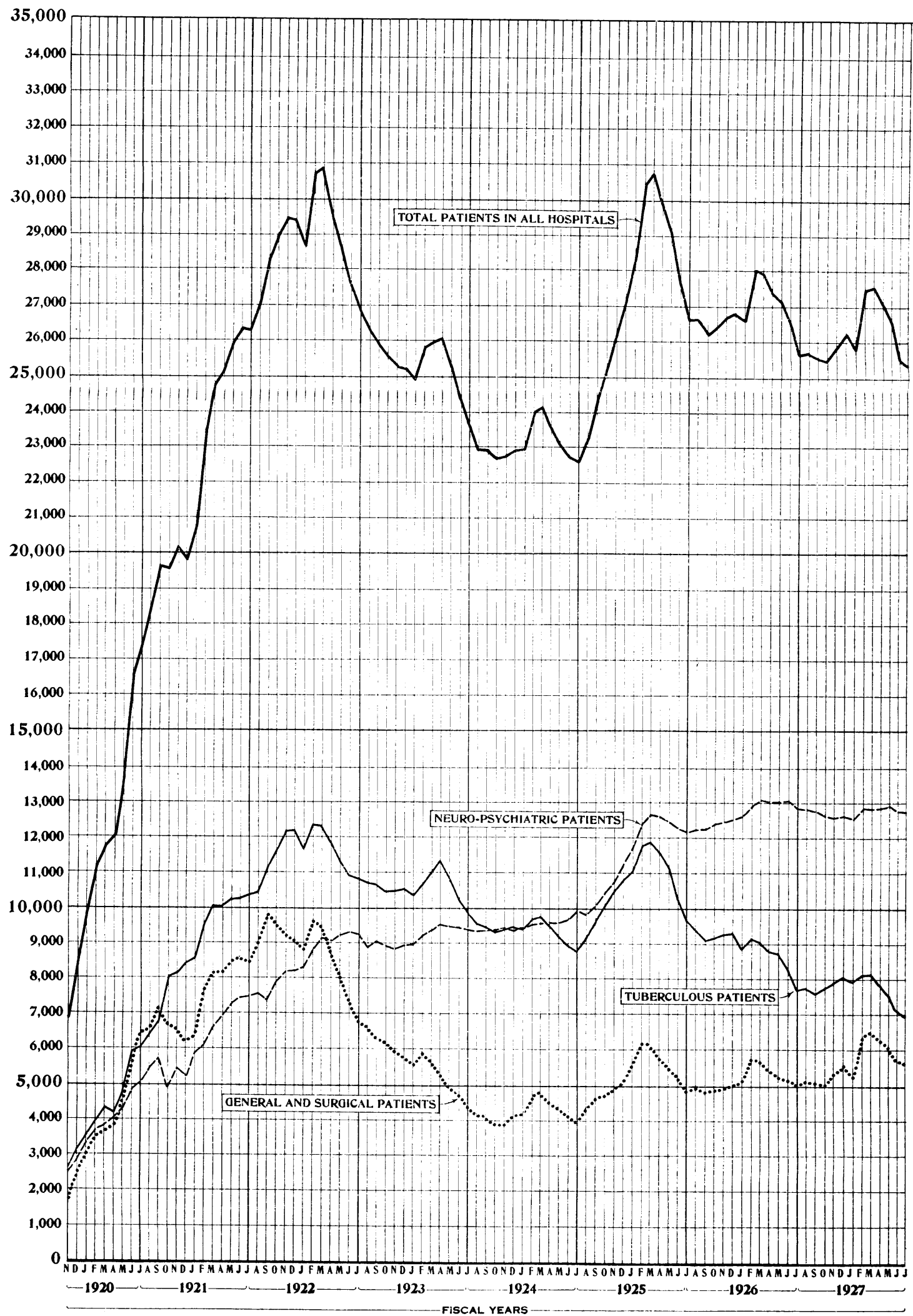
The composition of the 25,567 hospital population at the close of the fiscal year determines largely the hospital program for the coming year. A review of the hospital load on June 30, 1927, discloses that there were 12,650 neuropsychiatric patients under treatment, the largest number in the history of the bureau's hospitalization. The yearly increase in the neuropsychiatric-hospital load is the result of the cumulative effect of the usual comparatively low death rate, the low recovery rate among these patients, and the necessity for a prolonged hospital period, which averaged 220 days during the past fiscal year. The remainder of the hospital population was divided between 6,726 tuberculous patients, and 6,191 patients with a general medical and surgical disability. Of the 25,567 patients, 67 per cent were in United States veterans' hospitals, 22 per cent in other Government hospitals, and 11 per cent in State and civil institutions. Of the veterans in State and civil institutions, 68 per cent were in State hospitals for the treatment of a neuropsychiatric disability. It is of interest to note the number of veterans under treatment who were World War veterans and the number who had a compensable disability; 96 per cent of the veterans under hospitalization saw service in the World War, 73 per cent of whom received treatment for diseases or conditions received in or resulting from service. Of the 6,550 World War veterans who were under treatment for a noncompensable disability, 3,133 of them were for a general medical or surgical disability. There were 858 veterans of some war, occupation, or rebellion, other than the World War, who were under treatment at the close of the fiscal year, 84 per cent of whom were veterans of the Spanish-American War. The hospital population of veterans in continental United States consisted of 193 white females, 23,328 white males, and 1,637 colored males. A large number of the colored veterans were hospitalized in the United States Veterans' Hospital, Tuskegee, Ala., which institution is devoted exclusively to the treatment of this type of veteran. There are wards for colored patients in 19 other United States veterans' hospitals. It has not been feasible to segregate in one institution the female beneficiaries, inasmuch as there is no large number of them in one locality. In order to provide for their hospitalization, wards have been established in many of the Government hospitals.

The bureau has attempted to further its policy of hospitalizing a veteran within or as near as possible to his home State in so far as is consistent with the best medical treatment and available facilities. There were 57 per cent of the veterans hospitalized within their home State at the close of this fiscal year, 2 per cent more than on June 30, 1926. Table No. 24, which is an analysis of veterans hospitalized in the United States, gives a graphic representation of the hospitalizing of the veteran within or near his home State. The State location of the hospital is correlated with that of the State

U. S. VETERANS BUREAU

Actual Number of Patients Remaining in all Hospitals

From October 1919, to July 1927



location of the patient's residence. The success with which this policy is being carried out is immediately evident from the diagonal alignment of figures from left to right. The dispersion of the figures found in the hospitals of the District of Columbia is to be expected, since the diagnostic center of the eastern area is located at the United States Veterans' Hospital, Mount Alto, Washington, D. C., and also because the central office is located within its boundaries. The spread of figures in the Southwestern States results from the advantages in climatic conditions believed to be obtained from a residence in that part of the country for those who suffer from tuberculosis.

DISCHARGES

The real accomplishment of the bureau's work for its disabled is reflected in the discharges of the hospitalized veterans. During the fiscal year 72,111 veterans were discharged from hospitals, 36,269, or 50 per cent, of whom had reached the maximum benefit from hospitalization. The 12,693 hospitalizations for observation or special examination indicate the extent of the bureau's efforts to assist in the prevention as well as in the cure of disease.

The results obtained by the bureau's hospitals in the treatment of tuberculosis are of unusual interest, principally because the bureau has the opportunity to adopt the most modern and approved methods of diagnosis and treatment; to receive advice from nationally recognized tuberculosis specialists, and to treat patients who are relieved from economic worry through the compensation feature granted the hospitalized compensable veteran. The relief from financial worry is of vital importance to the tuberculous man, since rest and relaxation of both the mind and body is essential to arrestment of the disease. During the fiscal year there were 740 patients under hospital treatment whose disease reached the stage of "arrested" in an average of 424 days and a second group of 192 whose disease was "apparently arrested" after an average hospitalization of 448 days. There were 1,453 who reached a condition where the lesion was stationary or "improved." The above terms expressing the results of treatment are used with the full significance given them in the Schema of the National Sanatorium Association. The results are most gratifying for it is realized that they are obtained only through the supreme efforts, hopefulness, and confidence of both the patient and those who administer to them. The results accomplished among the tuberculous veterans compare favorably with those of the finest civil sanatoriums of the United States and England devoted to the care and treatment of tuberculosis. Every United States veterans' tuberculosis hospital is fully equipped to give any of the adjunct treatments indicated in the care of the tuberculous patient. Artificial pneumothorax therapy has been practiced to a large extent on both the moderately advanced and the far advanced lesions, having been performed 526 times during the fiscal year. Of the 181 tuberculous veterans who were discharged unimproved, after having received the maximum benefit from hospitalization, there were 100 cases where the disease had reached the terminal stage with an unfavorable prognosis. Every effort is made to discourage the veteran from leaving the institution until some stage of arrestment of the tuberculosis has been

attained. A general order on disciplinary discharges denying the veteran certain benefits and privileges when he leaves the hospital against advice of the medical officer in charge or without permission, is in force, and in many instances the medical officer in charge personally interviews the veteran and tries to persuade him to complete his hospitalization, thereby receiving the maximum benefit before returning to community life. That these penalties and persuasions are having some effect is evidenced in the decrease of approximately 1,000 discharges "against advice of medical officer in charge" during the fiscal year and a decrease of 275 veterans "leaving institutions without permission."

In spite of all the efforts that are being expended in treating the tuberculous veterans, and the search that is constantly being made for evidence of tuberculosis in its incipency, or in the early stages of reactivation, there were nearly seven times as many deaths from this disease as from any other single cause. During the fiscal year there was a decrease of 6 per cent from that of the fiscal year 1926, and a progressive decrease may be expected in proportion to the success that will be met with in inducing veterans to accept hospitalization before their condition becomes far advanced.

The admissions and the discharges of neuropsychiatric patients practically balanced during the fiscal year 1927. Of the 11,524 neuropsychiatric veterans discharged there were 7,094 who had not been under treatment for a frank psychotic condition. These were 1,203 constitutional psychopaths, drug addicts, epileptics, and mental defectives; 1,924 veterans with a functional nervous disease; 3,967 veterans with an organic disease or condition of the nervous system or an endocrinopathy. The policy of discharging these psychoneurotic patients and placing them under the medical supervision of the out-patient dispensaries and their social service workers, promises a more flexible neuropsychiatric bed supply for the future. The out-patient dispensaries are also assisting the paroled veteran to make his social readjustment. During the fiscal year the neuropsychiatric veterans' hospitals have authorized an average of 200 furloughs a month. Before an improved psychotic veteran is discharged from hospitalization he is placed on a furlough or parole status until a true social recovery has been accomplished. Among the dementia precox patients, which form the largest group of psychotic veterans under hospitalization, there have been 2,405 discharges, 614 of which have shown some degree of improvement, and 1,034 have been transferred to some other hospital for treatment. This transfer of patients is largely a result of the bureau's policy of observing the neuropsychiatric patient in the nearest governmental institution and subsequently, as the need is indicated, transferring him to a properly equipped institution. There has been an increase in the number of improved general paralytic patients this year over those of the previous year and a corresponding decrease in the number of deaths. Probably the most important factor contributing to this improved condition is the employment of the modern treatment of general paralysis by malarial inoculation. The large number of improved cases, namely, 51 per cent, among the manic depressive psychotics are especially gratifying in that this type of veteran may recover to such an extent that he may regain his position in the community, since the disease does not

result in any intellectual deterioration. Of the total 408 deaths of neuropsychiatric patients, 29 per cent were caused by general paralysis and 11 per cent by tuberculosis of the lungs.

There were 42,994 veterans with a general medical and surgical disability who were treated and discharged during the fiscal year. These patients had an average period of hospitalization of 47 days. Improvement of the diseases or conditions for which the patient was under treatment was obtained in 68 per cent of the total cases. The organic diseases of the heart as a cause of death increased from 98 in the fiscal year of 1924 to 257 during the fiscal year 1927. Another disease which is gaining in importance as a cause of death is that of chronic nephritis, or Bright's disease, which mounted from 49 deaths in 1924 to 129 in 1927. Among those diseases of the respiratory system causing death, the most important are broncho-pneumonia and pneumonia. The deaths from these causes are more than twice those of three years ago.

The importance of surgery is emphasized through the year's statistics, which indicate that for approximately every four patients admitted to hospital care and treatment by the United States Veterans' Bureau there is one operation. During the fiscal year 22,560 surgical operations were performed, 85 per cent of which were reported successful; 12 per cent were in the nature of a special examination or an adjunct treatment, such as the cystoscopy, spinal puncture, arsphenamine injections, artificial pneumothorax, etc.; and the remaining less than 3 per cent were unsuccessful, including the 0.38 per cent in which death occurred within 72 hours. The number of operations performed in the individual hospitals are reported in Table No. 27. It is interesting to note that 50 per cent of them were performed in the United States veterans' hospitals.

ADJUDICATION SERVICE

DISABILITY COMPENSATION

The fiscal year ended June 30, 1927, witnessed the bureau's most noticeable advancement in the refinement of organization and procedural methods and stabilization of the considerations controlling the adjudication of disability compensation claims, notwithstanding a material increase in the disability compensation load incident to the application of the benefits of amendatory legislation enacted July 2, 1926, and completion of reratings under the schedule of disability ratings, 1925.

Rating activities were centered primarily on the application of the schedule of disability ratings, 1925, to all active cases whose prior disability compensation status had been determined by a materially different standard. This involved a thorough review of all cases receiving compensation and a large number in which compensation had been terminated or disallowed under the schedule previously in effect. Practically all active cases have now been rerated under the new schedule, with results indicating that in general it provides relatively liberal compensation for actual disablement, as compared with that based upon disabilities evaluated under former schedules.

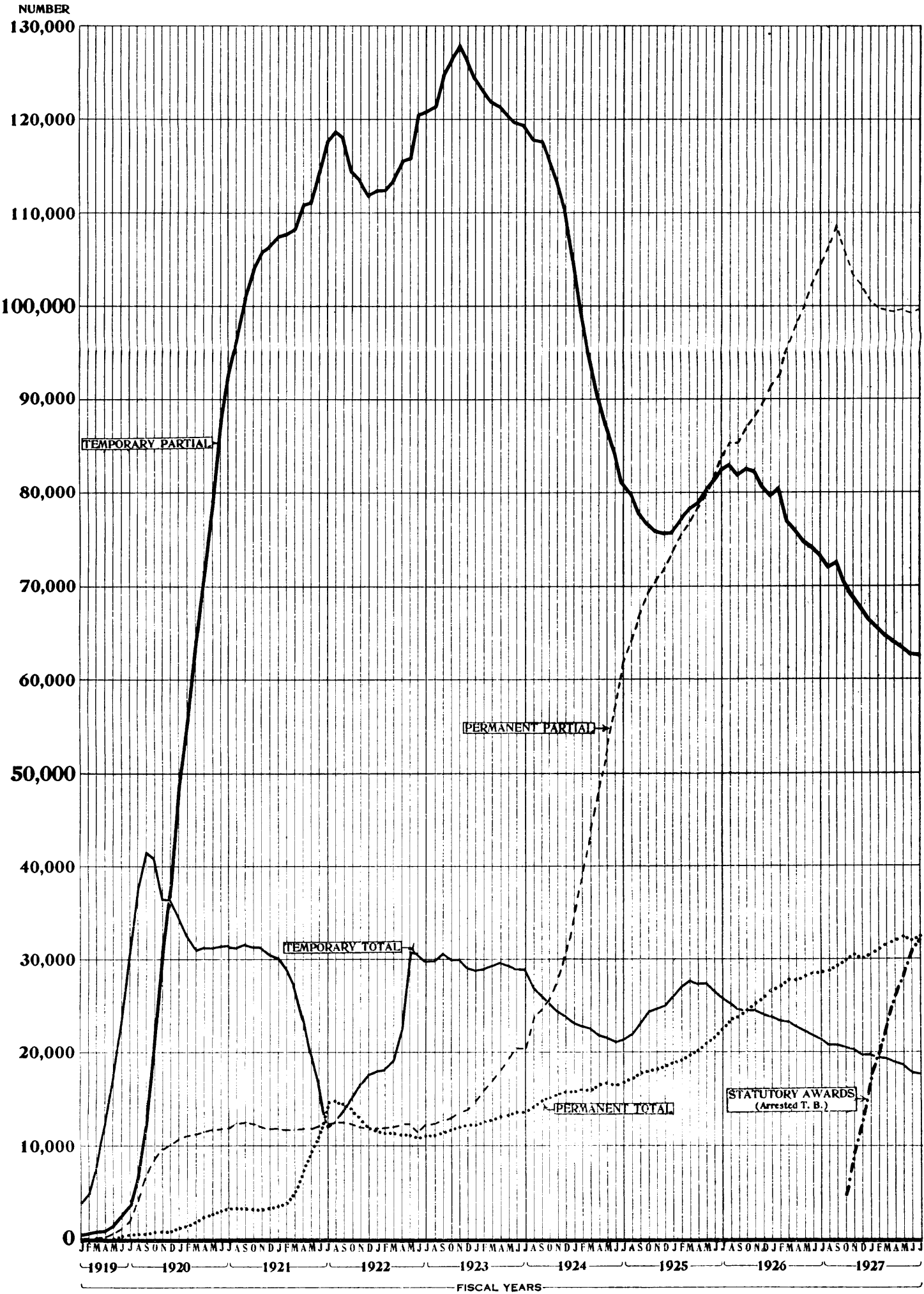
The determination of beneficiaries entitled to the \$50 monthly compensation for completely arrested tuberculosis which was found to have existed to a compensable degree, as provided by amendatory legislation of July 2, 1926, involved another comprehensive case review. As a means of expediting the application of this benefit to those entitled to same and to insure reliable determination of the requirements of the law, boards of tuberculosis specialists were created in each regional office and made responsible for all determinations regarding the existence of tuberculosis and the attainment of complete arrest in cases coming within the purview of this amendment to the World War veterans' act, 1924.

A reorganization based upon definite division of the responsibility for direction and control of compensation activities in central office and the field was completed during the year. It provided for a uniform system for the supervision of all adjudication activities in the regional offices by representatives from central office, expert in claims procedure, further stabilization of rating methods by a careful review in central office of many of the rating actions taken by the regional rating boards, and continuous study of the problems developing out of the application of the schedule of disability ratings, 1925, with the view of effecting promptly any necessary revision or adjustment. The effects of this system of supervision by representatives from central office is reflected in a greater uniformity of ratings and decisions, increased efficiency in general administration, and a material decrease in occasion to question actions inconsistent with law or procedure or inimical to the interests of the claimants or the Government. The review of rating actions by technically trained personnel

U. S. VETERANS BUREAU

ACTIVE COMPENSATION DISABILITY AWARDS

Each Month from January 1919, to July 1927



in the central office affords further control of the rating activities of the regional offices and provides an immediate method for correction or instruction by correspondence direct with the offices concerned when inconsistencies or irregularities are disclosed.

In addition to its endeavor to accomplish stabilization and control through field supervision and case review, during the year there was held in central office the first school of instruction for claims personnel. Each regional office and coordination group was represented at the sessions by its ranking claims officer. A definite program of instruction was carried out, free and open discussions of policy and procedure were encouraged, and many practical suggestions received for general improvement of adjudication processes.

During the fiscal year a board of medical, legal, and occupational consultants was established to handle the correspondence relative to interpretations and alleged inadequacies under the schedule of disability ratings, 1925, and also to undertake a reevaluation of the entire schedule with a view to its readjustment and revision. This board received and considered approximately 1,500 criticisms covering the separate items of the schedule, and also accomplished a thorough review of the portion of the schedule covering audition, vision, and orthopedic surgery, both in the occupational and medical aspects, isolating a large number of essential and minor inconsistencies, inadequacies, etc., corrections for which will be included in the readjustment.

The consolidation of all files in the central office pertaining to its beneficiaries made possible a combination of the adjudication functions of the World War adjusted compensation act, as amended, with the adjudication functions of the World War veterans' act, 1924, as amended. Under this compact organization all features of a case may be adjudicated at one time and at one point, thus eliminating lost motion and reducing to a minimum the transportation of the case folder.

The tabulation for the fiscal year 1927 showed not only the largest number of active disability awards but also the highest average monthly rate of compensation paid in the history of the bureau. There were 17,127 more compensation disability awards active on June 30, 1927, than on the same date of last year, with an average monthly increase of \$5.61 for each award. The increase in number of awards is especially significant in that during the fiscal year 1927 only 32 per cent of the disability claims filed were awarded, as compared with 50 per cent of those filed during each of the two preceding years. The reopened cases were largely responsible for this increase since the original claims awarded this year showed a decrease of 3,000 cases over those of the fiscal year 1926. The increased average monthly payment is largely due to the costs involved in the application of the disability rating schedule, 1925, and to the amendatory legislation of July 2, 1926, granting a \$50 statutory award to veterans who have had tuberculosis to a compensable degree but who have reached a condition of complete arrest of the disease.

The cost involved in the application of the disability rating schedule of 1925 has been approximated from studies of the active awards made at the termination of each quarter from January 1, 1926, to June 30, 1927. These studies indicate that for the cases affected by

the schedule there has been a steady increase in the average monthly payment. The increase shown by the tabulation closing March, 1926, was an average of 81 cents for each award, and for each successive quarterly tabulation the increase was, respectively, \$3.27, \$5.16, \$6.62, \$7.81, to the present monthly increase of \$8.47 as of June 30, 1927.

The \$50 statutory award granted the tuberculous cases which have reached a condition of complete arrest has resulted in an increased average monthly compensation payment for arrested tuberculosis cases of \$36.15 one year from the effective date of the amendment. The total increased monthly cost of these cases as of the end of the fiscal year was \$1,127,413. Of the 31,185 veterans who have arrested tuberculosis, there are 2,097, or 7 per cent, who have a major compensable disability other than pulmonary tuberculosis arrested. These major disabilities arranged in numerical importance are as follows: Diseases and conditions of the nervous system, circulatory system, joints and bursæ, respiratory system, and ear, nose, and throat.

The effect of the provision of section 202, paragraph 7, of the World War veterans' act, 1924, as amended, which reduces the disability compensation of an insane veteran without dependents to \$20 after he has been maintained for six months in an institution or institutions by the United States Government so long as he shall be an institutional case, is seen in the comparatively low average payment for a permanent total neuropsychiatric disability. Previous to the effective date of this amendment, the average monthly rate of compensation for the neuropsychiatric veterans, rated permanent total, was \$100, whereas at the present time the rate is \$75. The \$75 rate paid for this disability is \$28 less than that paid for permanent total tuberculosis cases and \$38 less than the average monthly payment awarded the general medical and surgical cases. The average payment of \$3 over the \$100 allotted permanent total disabilities in the tuberculosis cases results from the payment of a nurse or attendant wherever necessary. The 498 cases of blindness are largely responsible for the average monthly payment of \$113 for the permanent total general medical and surgical cases. The totally blind veterans are allowed \$150 and an additional \$50 for a nurse or attendant. Among the general medical and surgical diseases and conditions, those affecting the joints and bursæ form the most significant group, having 28,299 cases, 8,541 of which have some form of arthritis, and costing \$835,590 monthly. Second in importance are those diseases of the circulatory system, which number 19,152, including the 16,187 cardiac conditions, which have a monthly cost of \$672,055.

That a large number of the disabilities of the veterans are reaching a stationary level, which is reasonably certain to continue throughout life, is reflected in the increase of 72,211 awards rated on a permanent partial basis and the decrease of 19,035 awards rated on a temporary partial basis. In June of 1924 the permanent partial awards comprised 32 per cent of the total active cases, whereas in June of 1927 they formed 53 per cent. Since the application of the World War veterans' act of 1924, the permanent total awards have shown an increase of 92 per cent, and at the present time 13 per cent of all the active disability cases are rated permanent total, while 7 per cent are rated temporary total.

The average monthly disbursements for compensation disability awards for the fiscal years 1924 to 1927, in the following table, are

divided so as to show the expenditure for current awards and those required by the retroactive feature of certain of the awards:

Average monthly disbursements, current and retroactive, disability compensation by fiscal years, 1924 to 1927

	Fiscal year			
	1924	1925	1926	1927
Average monthly disbursements under current awards	\$6,699,077	\$7,379,916	\$8,355,667	\$10,270,135
Average monthly disbursements under retroactive awards	1,302,044	1,287,365	2,773,271	1,741,311
Total average monthly disbursements	8,001,121	8,667,281	11,128,938	12,011,446
Average number of beneficiaries	180,403	194,039	220,407	237,076
Average current award per month	\$37.13	\$38.03	\$37.91	\$43.32
Average retroactive award per month	7.22	6.76	12.58	7.34
Average total award per month	44.35	44.79	50.49	50.66

The increased monthly disbursement of \$4,010,325 over the four-year period represents an increase of 50 per cent, whereas the 56,673 beneficiaries represent an increase of only 31 per cent. That it has been possible to connect most of the compensable disabilities directly with service is evidenced by the fact that 53 per cent of the original awards have an effective date in the calendar year of 1919, which period witnessed the discharging of 75 per cent of the World War veterans from service. A comparison of the average retroactive monthly award over the past three years indicates that during the fiscal year of 1926 the rate was disproportionately high, in fact, twice as high as that of the fiscal year 1925. This rate of \$12.58 in the fiscal year of 1926 results from the completion of a rerating of approximately 75 per cent of the total active disability awards under the schedule of disability ratings, 1925. Under this rerating, 40 per cent of the awards were increased, many of them being made retroactive to the effective date of the new schedule. It was expected that the average monthly retroactive award for the present year would be less than that of the fiscal year 1925, inasmuch as the number of original awards during the year decreased by approximately 3,000, and a large percentage of these original awards carry a retroactive feature. The fact that it has not shown the expected reduction is due to the increased payments for the arrested tuberculosis cases, many of which have been retroactive.

DEATH COMPENSATION

On June 30, 1927, monthly payments of compensation for death or disablement resulting in death were being made to the dependents of 82,827 deceased World War veterans. The World War veterans who have died leaving dependents are approximately 45 per cent of the total veterans who have died in the service or after discharge from diseases and injuries incurred therein. Of these 82,827 deaths, approximately 35,500 occurred during the war, 23,000 of which were casualties in action. The report on the effective date of the death awards for dependents presents a vivid picture of the terrific toll

in human life that the United States paid in the two months from September, 1918, to Armistice Day. These deaths were 5,400 in September, 16,600 in October, and 3,000 during the first 11 days of November.

The dependent parent or parents predominate as beneficiaries in the death awards, numbering 76,750 and receiving \$18.18 as an average monthly death compensation award. There are 18,565 widows of the deceased veterans receiving \$29.95 monthly, and 25,172 dependent children drawing an average monthly death compensation award of \$12.09 for each child. The value of these monthly death compensation awards was \$2,255,855, or an average of \$27.23 for each case. In addition to this monthly death compensation, 77 per cent of these 82,827 deceased veterans carried some form of Government life insurance. The dependents of 6,342 deceased veterans have a permanent residence outside of the continental limits of the United States and receive a monthly payment of \$168.445. Of these 6,342 cases, there are 1,019 living in the United States insular possessions. The dependents of 2,002 deceased veterans, with a monthly payment of \$51,690, residing in Italy form the largest number of these beneficiaries living in any one foreign country.

Among the conditions resulting in death of the veterans, the diseases of primary importance are of the respiratory tract, of which class tuberculosis is the principal one. The deaths from diseases of the respiratory tract number 44,608, or 54 per cent of the total deaths, tuberculosis causing 20,082 of them.

REHABILITATION ACTIVITIES

The bureau's responsibility for the administration of vocational rehabilitation benefits to vocationally handicapped veterans was practically discharged with the close of the fiscal year 1927, there remaining at that time but 238 trainees to complete their courses during the fiscal year 1928 under the limitations of existing legislation. The administration of this work during the past year has been much less difficult than in previous years for the reason that no new entrances into training were permitted and few changes in prescribed courses were necessary.

Since the beginning of this work in 1918, the bureau has reviewed the eligibility of and registered 334,093 claimants for vocational training, of which number 179,364 actually entered training; has given vocational advisement, arranged appropriate courses, provided facilities, supplies, and supervision for those who accepted training; and has carried to completion and rehabilitation a total of 128,223 veterans to date. (There were 50,903 veterans who were discontinued for physical and other reasons or who died after entering training.) Employment opportunities were also provided upon completion of training for practically all who were in need of such assistance, the number of rehabilitated veterans reported without employment being negligible and consisting of principally those trained for professional occupations who preferred to make their own employment arrangements or to enter into business for themselves.

On July 2, 1926, the prospective total load of beneficiaries in all regional areas, classified as eligible for continuance in vocational

training under the provisions of section 406 of the World War veterans' act, as amended that date, was 2,027. A careful review of the individual cases was made, which resulted in the elimination of several hundred trainees whose employability was established. Upon completion of this review on August 31, 1926, the total active training load numbered 1,386. By December 31, 1926, all placement and project training cases had been declared rehabilitated or were otherwise terminated, and beginning with January 1, 1927, there were but 612 trainees pursuing standardized courses in educational institutions.

An effort was made during the past year to effect, concurrently with the gradual decrease in the training load, a contraction and consolidation of administrative functions and personnel in the interest of economy without sacrifice of efficiency. The rehabilitation survey groups in the regional offices have been discontinued and their former duties transferred to the claims and rating boards, while the limited remaining rehabilitation activities have been absorbed and are being carried to termination by the part-time services of employees in the adjudication division, none of these employees being assigned full time to rehabilitation duties.

The central-office organization of the rehabilitation division in June, 1926, consisted of 35 employees assigned full time to these activities. This number has been reduced so that at the present time there are but 4 employees engaged in the final closing of this work.

TERM AND AUTOMATIC INSURANCE AWARDS

On June 30, 1927, there were 153,422 active death and disability awards on which installments of term insurance were being paid. The death awards were 141,087 and the disability awards 12,335. The average monthly insurance payment to the beneficiaries of deceased veterans was \$51.18, and to the veteran himself, because of his permanent and total disability, \$45.43. The tuberculous and psychiatric veterans represented 36 per cent and 32 per cent, respectively, of the total number receiving a monthly insurance payment because of a permanent and total disability. There have been 18,058 veterans who have received monthly payments of term insurance for a permanent and total disability, of whom 3,024 have improved to such an extent that they are no longer permanently and totally disabled, and 15,034 have died. Of these 15,034 veterans, 10,692 have died from tuberculosis. During the past year monthly insurance payments have been terminated by lump-sum payments in 3,668 cases.

Term-insurance awards were made to the beneficiaries of 631 deceased veterans during this year. The number of awards made annually for term insurance is constantly growing smaller as we move further from the period of the World War. There are several apparent reasons for this: Fewer men are carrying term-insurance policies; and in cases in which lapsed or canceled insurance was revived by the application of unpaid compensation the class of beneficiaries was limited by the amendment of July 2, 1926, to mother, father, wife, or child.

The value of term insurance paid on 153,422 death and disability awards on June 30, 1927, was \$1,353,581.249. The parents of deceased veterans were the beneficiaries in 65 per cent of the awards,

the widows in 14 per cent, and the other beneficiaries in the permitted class in the remaining 21 per cent. The small per cent of awards paid to widows indicates that most of the insured veterans were unmarried men. The beneficiaries of 6,019 deceased veterans residing outside of the United States and its possessions are being paid term insurance valued at \$52,691,287. Of the beneficiaries who are residing in European countries, more than 38 per cent live in Italy. The beneficiaries of 469 deceased veterans live in Canada.

Automatic insurance payments were being made on 7,896 active disability and death awards on June 30, 1927. This insurance is valued at \$34,203,173. There are 299 permanently and totally disabled veterans receiving the benefits of this insurance, in addition to the beneficiaries of 7,597 deceased veterans. Insurance has been terminated in 50 cases because the veteran had improved to such an extent that he was no longer permanently and totally disabled, and in 216 cases the death of the veteran has caused the discontinuance of the payments. In 613 cases the payments on automatic insurance have been terminated because there were no beneficiaries in the permitted class. In 285 cases automatic insurance was being paid to the veteran or the beneficiaries of the deceased veterans residing outside of the continental limits of the United States; this insurance being valued at \$1,235,285.

INSURANCE ACTIVITIES

An intensive nation-wide insurance campaign was conducted during the latter half of this year to induce veterans to take advantage of their right to reinstate and convert term (war-time) insurance, which terminates by law on July 2, 1927. The President, by proclamation, designated the week of January 31 to February 7 as Government life insurance week. The campaign in the field was directed by the bureau's regional managers in cooperation with service and welfare organizations and other interested agencies. That this drive met with marked success is attested by the receipt since January 1, 1927, of approximately 245,000 applications for conversion, to the amount of \$1,400,000,000. The fact that such an unusually large number of veterans filed their applications during the closing weeks of the campaign made the task a most difficult and unprecedented one, but through the careful plans and extra facilities that were provided this work is being handled efficiently and without undue delay, and reflects creditably on the bureau's ability to render successfully a standard of service comparable with that of commercial life insurance companies.

An improvement in service, as well as a saving and convenience to policyholders, has resulted from the efforts made by the bureau to induce policyholders to change the mode of paying premiums from a monthly to a quarterly, semiannual, or annual basis. This practice not only effects a material saving in administrative expenses but it also gives to the policyholder the benefit of a reduced premium rate. In addition, experience shows that the convenience of paying premiums four times, twice, or once each year, instead of twelve times, actually minimizes the possibility of policyholders allowing their insurance to lapse.

YEARLY RENEWABLE TERM INSURANCE IN FORCE

On June 30, 1927, there were in force 87,100 contracts of yearly renewable term insurance, amounting to \$672,074,816. This represents a decrease of 43,003 policies, amounting to \$336,436,528, from the number and amount in force on June 30, 1926. This decrease is due to the natural loss resulting from lapses and death, the decrease in the number of men in the active military and naval service carrying insurance, and particularly to the large number of conversions to United States Government life (converted) insurance, which privilege expires by law on July 2, 1927.

YEARLY RENEWABLE TERM INSURANCE PREMIUM INCOME

The following table shows, by sources, the total amount of yearly renewable term insurance premium income to June 30, 1927:

Source:

Deposited direct into the Treasury by--	Amount
War Department-----	\$272,332,051.83
Navy Department-----	28,328,882.87
Marine Corps-----	4,982,970.10
Coast Guard-----	599,625.04
U. S. Public Health Service-----	230.90
Paid direct to bureau-----	147,609,730.76
Gross receipts-----	453,853,491.50
Less--	
Refunds made by insurance cashier-----	\$1,543,835.57
Refunds made by disbursing clerk-----	839,187.95
	2,383,023.52
Net receipts-----	451,470,467.98

APPLICATIONS FOR UNITED STATES GOVERNMENT LIFE INSURANCE (CONVERTED INSURANCE)

Applications for United States Government life insurance approved to June 30, 1927, totaled 627,274 and amounted to \$2,607,944,219. During this fiscal year there were approved 94,775 applications, aggregating \$528,392,819, as compared with 60,428, amounting to \$321,720,903 during the fiscal year 1926.

The following table shows the number and amount of United States Government life-insurance policies issued by months for the fiscal year 1927:

Policies issued

Date	Number	Amount	Date	Number	Amount
1926			1927		
July-----	8,687	\$45,141,071	January-----	2,135	\$11,964,289
August-----	11,006	57,415,350	February-----	2,322	13,023,563
September-----	17,747	82,313,305	March-----	4,016	23,069,249
October-----	4,352	20,068,671	April-----	5,824	35,403,681
November-----	2,274	10,266,703	May-----	11,413	71,512,772
December-----	2,161	11,255,954	June-----	22,838	146,958,211
			Total-----	94,775	528,392,819

ANALYSIS BY PLAN OF UNITED STATES GOVERNMENT LIFE INSURANCE

The following table shows the number and amount, the percentage, and average amounts of United States Government life-insurance policies issued to June 30, 1927, classified by plan:

	Number	Amount	Per cent of total		Average policy
			Number	Amount	
Ordinary life.....	133,006	\$689,303,718.00	21.20	26.43	\$5,182.50
20-payment life.....	177,370	760,409,599.00	28.28	29.16	4,287.14
30-payment life.....	27,536	141,087,823.00	4.39	5.41	5,123.76
20-year endowment.....	192,924	506,997,932.00	30.75	19.44	2,627.97
30-year endowment.....	87,557	157,951,510.00	5.99	6.05	4,205.65
Endowment at age 62.....	33,601	163,909,019.00	5.36	6.29	4,879.89
5-year convertible term.....	25,280	188,224,618.00	4.03	7.22	7,445.50
Total.....	627,274	2,607,944,219.00	100.00	100.00	4,157.58

UNITED STATES GOVERNMENT LIFE (CONVERTED) INSURANCE IN FORCE

On June 30, 1927, there were in force 500,880 United States Government life insurance policies, amounting to \$2,220,969,824. This represents an increase of 77,323 policies, amounting to \$447,894,160, over the number and amount of policies in force on June 30, 1926. During this fiscal year 3,781 policies, amounting to \$15,958,652 insurance, were reinstated.

UNITED STATES GOVERNMENT LIFE INSURANCE POLICIES SURRENDERED FOR CASH AND PAID-UP INSURANCE

United States Government life insurance policies provide that after having been in force one year they may be surrendered for cash or for paid-up insurance. During the fiscal year ended June 30, 1927, there were 4,127 policies, amounting to \$4,874,034.26, surrendered for cash. The total number of policies surrendered for cash to June 30, 1927, is 34,082, amounting to \$86,154,304.81 of insurance.

During this year the value of policies surrendered for paid-up insurance amounted to \$544,500; while 98 paid-up policies, to the value of \$110,397.32, were issued. Up to June 30, 1927, policies to the value of \$1,939,000, have been surrendered for paid-up insurance, and 383 paid-up policies, amounting to \$304,936.58 of insurance, have been issued.

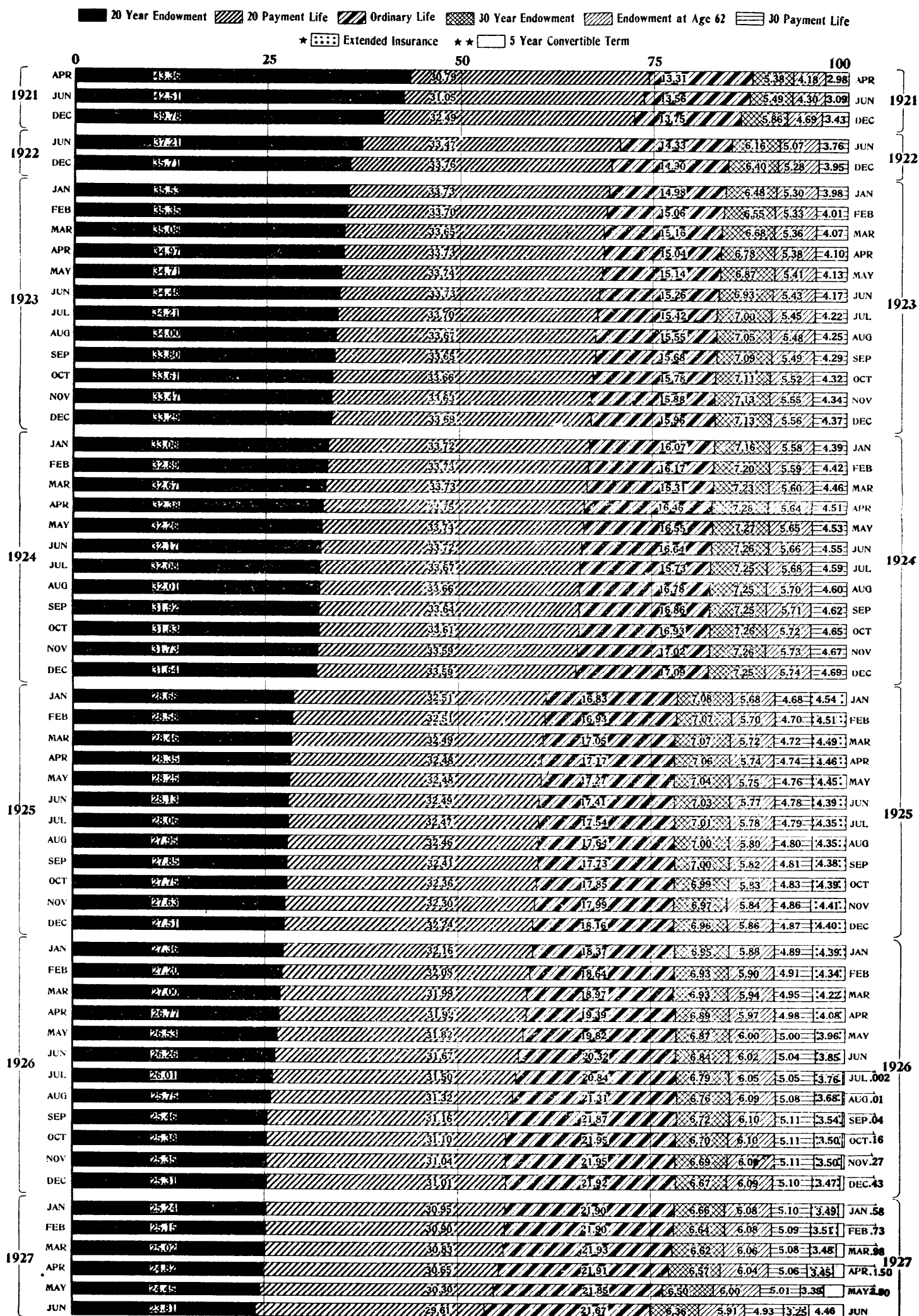
UNITED STATES GOVERNMENT LIFE INSURANCE PREMIUM INCOME

United States Government life insurance premiums are deposited to the credit of the United States Government life insurance fund, from which are paid claims on account of total permanent disability and death, dividends, and refunds. During the fiscal year ended June 30, 1927, 2,440,325 premiums, amounting to \$54,047,690, were received on United States Government life insurance policies, while the total number received to June 30, 1927, is 12,885,814, aggregating \$263,604,671.20.

U. S. VETERANS BUREAU

CONVERTED LIFE INSURANCE POLICIES IN FORCE

Selection of Plans by Per Cent of Total Number of Policies in Force to Date



★ Beginning January 1925

★★ Beginning July 1926

DIVIDENDS PAID ON UNITED STATES GOVERNMENT LIFE INSURANCE

The fund from which dividends on United States Government life insurance are apportioned is accumulated from two sources—savings due to deferred mortality and excess interest on the amount earned on invested funds over the assumed rate of $3\frac{1}{2}$ per cent. There were 429,093 dividends, amounting to \$3,609,004.75, paid during this year. The total dividends paid to June 30, 1927, are 2,113,760, amounting to \$15,146,094.44. The following table shows the dividends paid in 1927 on policies for \$1,000 issued at the age of 30:

Amount of dividend paid in 1927

Year of issue	End of policy year	Ordinary life	20-pay-ment life	30-pay-ment life	20-year endow-ment	30-year endow-ment	Endow-ment at age 62	5-year con-vertible term
1926.....	1	\$1.73	\$1.76	\$1.74	\$1.81	\$1.76	\$1.75	\$1.70
1925.....	2	1.76	1.82	1.78	1.92	1.82	1.81	0
1924.....	3	1.80	1.88	1.83	2.04	1.88	1.87	0
1923.....	4	1.83	1.94	1.87	2.16	1.95	1.93	0
1922.....	5	1.87	2.01	1.92	2.29	2.02	1.99	0
1921.....	6	1.90	2.08	1.97	2.42	2.09	2.05	0
1920.....	7	1.94	2.15	2.02	2.56	2.16	2.12	0
1919.....	8	1.98	2.22	2.07	2.70	2.24	2.19	0

UNITED STATES GOVERNMENT LIFE (TERM AND CONVERTED) INSURANCE IN FORCE

The following table shows by fiscal years the number and amount of yearly renewable term and United States Government life insurance in force:

Fiscal year ended June 30—	Yearly renewable term insurance		United States Govern-ment life insurance		Total	
	Number	Amount	Number	Amount	Number	Amount
1921.....	397,890	\$2,980,660,235	253,164	\$868,715,500	651,054	\$3,849,375,735
1922.....	300,926	2,314,663,588	280,852	1,033,736,886	581,778	3,348,400,474
1923.....	240,291	1,854,145,796	319,774	1,216,064,021	560,065	3,070,209,817
1924.....	209,385	1,609,030,534	353,215	1,375,542,924	562,600	2,984,573,458
1925.....	177,328	1,372,091,391	375,012	1,492,637,338	552,340	2,865,028,729
1926.....	130,103	1,008,511,344	423,557	1,773,075,664	553,660	2,781,587,008
1927.....	87,100	672,074,816	500,880	2,220,960,824	587,980	2,893,044,640

ADJUSTED COMPENSATION

The claims for benefits under the World War adjusted compensation act that had been adjudicated to June 30, 1927, totaled 3,359,178, and were valued at \$3,279,030,198. Of this number, 3,166,038 represented adjusted-service certificates issued to veterans, valued at \$3,248,615,081; 109,365 were cash payments to veterans whose adjusted-service credit did not exceed \$50, amounting to \$3,574,201; 71,859 were claims on which quarterly payments were made to the dependents of veterans whose adjusted-service credit was more than \$50, aggregating \$26,257,199; 4,084 were cash payment to dependents of veterans whose adjusted-service credit was less than \$50, amount-

ing to \$113,797; and 7,832 were claims for the \$60 bonus paid to the dependents of veterans who died in service and therefore did not receive this benefit upon the termination of said service, aggregating \$469,920. Death claims to the value of \$34,224,720 have been awarded to the beneficiaries of 33,419 deceased veterans who had received adjusted-service certificates.

Since January 1, 1927, the effective date of the loan provision of the World War adjusted compensation act, 689,805 loans, amounting to \$64,433,625.19, have been made to veterans upon the security of their adjusted-service certificates. Of this number of loans, 464,468 have been made by banks or trust companies and 225,337 by the bureau.

COMMITTEE ON RECOVERIES

Adjudications by central office and regional committees on recoveries in the application of the provisions of section 28 of the World War veterans' act, 1924, as amended, for this fiscal year were as follows:

Overpayments disposed of

	Waived		Not waived		Total	
	Number	Value	Number	Value	Number	Amount
Central committee on recoveries:						
Central office cases.....	528	\$301,359.41	990	\$663,454.92	1,518	\$964,814.33
Regional—						
On review cases.....	274	182,975.31	649	421,983.48	923	604,958.79
On appeal cases.....	29	3,729.54	65	12,703.20	94	16,432.74
Total.....	831	488,064.26	1,704	1,098,141.60	2,535	1,586,205.86
Regional committees on recoveries.....	1,358	100,881.97	2,325	205,612.52	3,683	306,494.49
Grand total.....	2,189	588,946.23	4,029	1,303,754.12	6,218	1,892,700.35

During the fiscal year, 6,218 cases of overpayment were acted upon in central office and in regional offices, of which number 2,189, or 35.2 per cent, of the overpayments were waived. The central office committee on recoveries authorized waivers on 32.8 per cent of the cases handled by that section, as compared with 36.9 per cent of the overpayments waived on cases handled in regional offices. The average overpayment handled by the central office committee on recoveries amounted to \$625.72, and in regional offices the average was \$83.22. The average amount of the overpayment waived by the central office committee was \$587.32, as compared with the average of \$74.29 for regional-office cases on which overpayment was waived.

CENTRAL BOARD OF APPEALS

During the fiscal year changes in organization have been made in the central board of appeals. The appeal group on central-office cases, formerly under the chairman of the central office advisory group on appeals, was transferred to the central board of appeals on August 15, 1926. By reason of the small volume of appeals in the area of the board located in Boston, Mass., section A was discontinued May 15, 1927, and the appeals arising in that area on which

claimants desire personal hearings are now conducted by a board traveling to Boston from section B of the board located in New York City. All other appeals arising within what was formerly area A are now forwarded direct to and handled by section B of the board in New York City.

The central board of appeals, as now constituted, consists of a chairman, with legal and medical assistants in central office, and five sections, located in New York, N. Y.; New Orleans, La.; Chicago, Ill.; San Francisco, Calif.; and in the central office, Washington, D. C. The procedure established in these sections is such that a claimant appearing before any one of them may receive a personal hearing and consideration of all phases of his claim over which the board has appellate jurisdiction under the World War veterans' act as amended.

The purpose of this board is to provide an absolutely equitable and fair adjudication in every case coming before it, and to effect, under the laws and regulations interpretative thereof, a decision fair to the claimant and just to the bureau, avoiding where possible, unnecessary reviews or revisions of decisions in cases previously adjudicated by properly constituted authorities of the bureau.

During the fiscal year 10,512 cases were referred to the board and 10,664 cases were disposed of, there having been 700 cases on hand at the beginning of the year. The pending number before all sections of the board on June 30, 1927, was 548 cases.

DIRECTOR'S ADVISORY GROUP ON APPEALS

The purpose of this group is to give impartial study and make unlimited inquiry into the merits of cases appealed to the director. It is composed of specially chosen men with medical or legal training and of such as have had wide experience in this class of work. Appeals are entertained from claimants who are dissatisfied with the action of the regular appellate bodies, and they may also be made by designated officials of the bureau upon presentation of proper reasons therefor.

In the matter of presenting cases no formal appeal is required. A mere request for review, with a statement of the particular features appealed from and upon what error or defect the appeal is based, is sufficient. The claimant or his duly authorized representative may appear at a hearing before the group and personally present the case. Personal hearing is had in approximately 17½ per cent of all cases. A transcript of the hearing is made a part of the claimant's record in order that it may be given consideration when the case is reviewed.

As to the method of handling cases, upon completion of the study of the file by individual members of the group open discussion is held until the most tenable conclusion with reference to the question at issue has been reached. A memorandum brief, with a discussion of the case, followed by the conclusion reached, is then transmitted to the director with recommendation for disposing of the case. This action is tentative, and unless approved by the director it has no necessary part in the final decision.

At the beginning of this fiscal year there were 990 cases awaiting review by this group. The number of new cases received during the year was 3,994, an increase of approximately 450 over the number received during the fiscal year 1926. During this year decisions were rendered in 3,501 cases, and action other than decisions was taken in 950 cases. The total number of cases pending at the close of this year was 533.

LEGAL SERVICE

The legislative work of the bureau was, as usual, conducted in the legal service during this year. Congressional committees were given every assistance in the preparation of amendments to the general statutes, as well as in the drafting of bills for the relief of individual veterans. At the request of these committees, reports were prepared showing the effect of proposed amendments on existing legislation, and further informing them as to circumstances surrounding individual cases involving veterans for the relief of whom special bills were proposed.

Legal work in regional offices was organized under the provisions of the Legal Field Manual, which was issued effective November 15, 1926. This created the office of regional attorney in each of the 54 regional offices. This official is responsible for all legal and guardianship work in the regional office and is available for such additional legal duties as may be required by bureau hospitals located within the regional territory. In addition, these attorneys are utilized wherever possible in connection with the preparation and trial of cases in litigation, both civil and criminal. These cases include insurance suits, prosecutions in Federal courts for violation of the penal provisions of the various acts under which the bureau operates, and actions in State courts in connection with guardianship matters. In this work the regional attorneys are directly subject to the supervision of the general counsel of the bureau. In the first two classes of cases they cooperate with the local United States district attorneys. In the actions in State courts, however, the regional attorneys act on their own responsibility, subject to the general supervision of the general counsel.

The publication monthly of the digest of opinions of the Attorney General and of the general counsel of the bureau, and decisions of the Comptroller General and of the director has been discontinued. Copies of these opinions and decisions, however, are furnished regional attorneys, who are required to maintain a precedent file thereon. All opinions rendered by regional attorneys are forwarded to central office for review and, unless based on a well-defined principle of law, are not put into effect until approved by the general counsel. During this fiscal year regional attorneys rendered a total of over 700 opinions covering all phases of the law.

The defense of actions brought against the United States is committed generally to the Department of Justice, and locally to the United States attorney for the district in which the suit is called. The bureau in all instances assists the United States attorney in the preparation and trial of cases through the services of regional attorneys and central office attorneys especially trained in this class of litigation. In general, the regional attorneys assist in all cases, except those in which important and complex questions of law are involved. In these latter cases, attorneys are assigned from central office.

One hundred and ninety-seven insurance suits were disposed of during this fiscal year. Of these, 54 resulted in judgment for plain-

tiffs, while 143 resulted favorably to the Government; 46 resulted in judgment for, or were dismissed on motion of, the Government, while 91 were dismissed either by stipulation or on motion of the plaintiff, and the remaining 6 were disposed of otherwise. These suits involved a total of \$2,955,414.83, and the cases on hand at the close of this year involve over \$4,000,000. The judgments recovered by plaintiffs in the 54 cases amounted to a total of \$216,707.51, although the insurance involved and which may be payable in future installments totals \$491,460. The suits resulting favorably to the Government involved insurance to the amount of \$2,463,954.83. The following table indicates cases on hand on July 1, 1926, the number received and disposed of, and the balance on hand June 30, 1927:

	On hand	Received	Disposed of	Balance
Suits on contracts of insurance:				
In litigation.....	298	267	197	368
Threatened.....	69	474	339	204

The prosecution of criminal cases is committed to the Department of Justice, but, as in litigation in civil proceedings on insurance contracts, the bureau prepares the transcript of cases for submission to that department, and in several instances attorneys from central office have assisted in the presentation of cases to the grand jury as well as in the actual trial of the case. A large proportion of such cases involve some element of fraud falling under the penal provisions of the various acts relating to the bureau, but where these statutes do not cover the particular offense the case is then prepared under the germane provisions of the Federal Criminal Code.

At the beginning of this year there were 170 criminal cases on hand. During the year 158 were received and 131 cases disposed of, 51 were dismissed by the Department of Justice, in 21 the grand jury failed to return indictments, 4 were barred by the statute of limitations, and 3 were disposed of in other manner. Thirty-seven cases were tried, 34 resulting in conviction and 3 resulting in the acquittal of the defendant.

To the bureau also falls the preparation of the defense where bureau officials have been sued as individuals in connection with their official acts.

Section 313 of the war risk insurance act, as amended, and which Congress has made applicable to section 213 of the World War veterans' act, 1924, as amended, provides that, if an injury or death for which compensation is payable is caused under circumstances creating a legal liability upon some person other than the United States to pay damages therefor, the director, as a condition to payment of compensation by the United States, may require the beneficiary to assign to the United States any right of action he may have to enforce such liability of such other person, or, if it appears to be for the best interests of the beneficiary, the director may require him to prosecute the said action in his own name, subject to regulations. This section further provides that the cause of action so assigned to the United States may be prosecuted or compromised by the director, and any money realized or collected thereon, less the

reasonable expenses of such realization or collection, shall be placed to the credit of the military and naval compensation appropriation. If the amount placed to the credit of such appropriation in such case is in excess of the amount of the award of compensation, if any, such excess shall be paid to the beneficiary after any compensation award for the same injury or death is made. A report of this work for the fiscal year 1927 is as follows:

	Pending June 30, 1926	Received	Closed	Pending June 30, 1927
In suit.....	32	0	4	28
Not in suit.....	11	17	21	7

Amount collected, distributed, and credited against compensation payments during the fiscal year 1927.....	\$50,586.53
Amount undistributed but credited against compensation payments June 30, 1927.....	6,196.99
Total.....	56,783.52
Judgments in favor of plaintiffs pending June 30, 1927.....	36,850.00
	93,633.52

There are 18 suits filed against the United States and 3 in which the United States is plaintiff pending in the Court of Claims and the United States district courts that involve overpayments of insurance and compensation, the construction of contracts and leases, and the rights of beneficiaries under the World War adjusted compensation act.

In point of volume the largest item of the year's legal activities in central office has centered about requests for advisory opinions, covering in one way or another virtually every phase of the bureau's multifarious affairs. The table for these general submissions for the year shows the following results:

	On hand July 1, 1926	Received	Disposed of	On hand June 30, 1927
Number of questions.....	28	14,054	13,986	96

These figures include the opinions of the regional attorneys in regional offices which were reviewed under the procedure referred to in the earlier portion of this report.

GUARDIANSHIP ACTIVITIES

On July 2, 1926, the director was authorized by an act of Congress, incorporated in the World War veterans' act and known as section 21, to take definite action relative to the guardianship of bureau beneficiaries. Pursuant to this new authority the guardianship activities of the bureau were reorganized, and there was established a guardianship division in the legal service. A legal field manual was prepared and promulgated shortly thereafter which provided for the organization of guardianship matters in the field under the

supervision of regional attorneys. These attorneys are responsible for the certification as to the legality of all appointments; the fitness of the person appointed to act as guardian; the scrutiny of accounts rendered to the bureau from time to time and not less than once each year; the checking of amounts of bond protecting the beneficiary's estate; and also to determine the sufficiency of surety when such surety is represented by a personal bondsman.

Upon regional attorneys also rests the responsibility of seeing that each ward within his jurisdiction is receiving the proper care and benefit of the payments made in behalf of such beneficiary, and in carrying out this idea the regional attorney secures at least annually a social survey report of the individual beneficiary.

Supervisory control over all guardianship matters, however, is maintained by central office, and, in order that this activity may receive the attention it warrants, legal supervisors make periodical surveys of regional offices and check and audit each guardianship case at least once a year for the purpose of determining whether uniformity exists as to bureau policy, and to discover whether any discrepancies occur which should receive immediate consideration.

The bureau policy with regard to the appointment of guardians and other fiduciaries is being carried out with marked success. This policy favors the appointment of banks and trust companies as fiduciary for incompetent and minor beneficiaries. In some instances these trust institutions act as guardian for the estate only and permit the appointment of a near relative as guardian over the person of the beneficiary. It has been found that these trust institutions administer the estates with the least possible expense and cooperate with the bureau in a most hearty manner and render their annual accounts efficiently and promptly. A great many of the institutions employ a trust officer, whose contacts each beneficiary personally, determines what is necessary for his proper care and maintenance, and provides him and his dependents with such assistance as conditions warrant. In some localities trust companies are administering these estates without any fee whatsoever and credit to the estates annually such interest as may be earned on the corpus of the estate, which they invest for the beneficiary.

In accordance with section 21 of the World War veterans' act, as amended, it is the present policy of the bureau to consider five incompetent wards as the maximum number which an individual can efficiently manage and give the necessary attention. This policy has been carried out as regards the District of Columbia, and while it has also been adopted for the entire country it has not yet been possible to make all of the necessary reductions. In some few States the statutes are such that progress has been necessarily slow, while in others the lack of full cooperation on the part of State courts has delayed matters considerably. However, no guardian who is acting for five or more beneficiaries is recognized by the bureau in cases of new appointments. The policy of the bureau relative to filing surety bonds is being carried out to the fullest possible extent. Where such bonds can not be secured the regional attorney is required to determine whether the personal bondsman possesses sufficient assets to liquidate the amount of his bond in the event of default by the guardian.

Close supervision of accounts rendered by guardians has been maintained. There has been issued a guardian's account book, which contains, in addition to Federal and State laws and regulations of the bureau on guardianship procedure, pages appropriately printed to enable each guardian to keep strict account of all receipts, disbursements, investments, and other matters pertaining to the funds intrusted to him. At stated intervals this book is submitted to the regional attorney for check and audit, and in the event that it is found to be correct a recapitulation is made and submitted to the guardian for his signature and oath, after which it is presented by the regional attorney to the appropriate court with recommendation that it be accepted. This procedure eliminates the necessity of utilizing the services of outside attorneys, with a consequent saving to the estate of the ward, and is bound to result in closer cooperation between the guardian, the bureau, and the State courts.

In some instances it has been found that courts have been asked to allow attorneys' fees and commissions in what has been considered excessive amounts. The bureau is now vested with authority to file exceptions to these accounts, and has done so in numerous cases with the result that the fee allowed has been substantially less than that originally asked. Most careful supervision is absolutely essential to keep commissions and fees at a minimum and to be assured that dissipation, misapplication, or misuse of funds paid by the Government for the benefit of certain intended incompetent beneficiaries does not occur. During this year approximately \$619,781 was recovered; commissions and fees were reduced, over \$5,000 being actually recovered by means of exceptions filed; and many guardians were removed because of their inefficient administration and their failure to properly discharge the trust imposed upon them by the terms of their appointments.

In securing social and economic surveys on minor and incompetent wards it has been found beneficial to accept the services of auxiliaries of outside service and welfare organizations. These organizations have collected data on veterans which are of immeasurable aid to bureau personnel engaged in or interested in social-service problems.

In a number of instances guardians have been prosecuted and found guilty of embezzlement of their wards' estates. These prosecutions are usually had in the Federal courts. However, in some few instances during this year embezzling guardians have been prosecuted, found guilty, and sentenced by both the Federal and State courts.

At the close of this year there were 22,160 incompetent beneficiaries, for whom 19,287 guardians had been appointed, in the United States. In addition there were 25,200 minors, for whom 17,199 guardians had been appointed, making a total of 47,360 wards and 36,486 guardians.

In conclusion, it may be stated that carrying out effectively the bureau's policy relative to incompetent and minor beneficiaries constitutes a difficult task because of the variation in State laws and local attitudes; but it is one which, judging from the returns of this year, is well worth the effort expended. The policy of carefully safeguarding and protecting funds appropriated for the benefit of beneficiaries under legal disability is proceeding with marked success and is recognized throughout the country as an earnest effort with a

humanitarian basis and background. It is not always possible to prevent inevitable losses because of human frailty and greed, nor unwise expenditures made through ignorance of the guardian; nevertheless the bureau is attempting to not only check the activities of the guardian but also to provide an additional protection of the estate by requiring a sufficient and adequate bond. In addition, both the ward and his guardian have been provided with a qualified regional attorney to look after their interests and advise them in so far as bureau matters are concerned. The bureau's right to interfere in local State courts and to be heard has been generally recognized, and, with few exceptions, the bureau's attorney finds hearty and full cooperation on the part of the courts.

Legal and guardianship activities in regional offices during the fiscal year ended June 30, 1927

Number of legal opinions written by regional attorneys.....	1, 137
Number of cases tried by regional attorneys:	
(a) Won	180
(b) Lost	48
(c) Pending	465
(d) Dismissed	77
(e) Appealed	17
Social service work:	
(a) Number of county workers	3, 743
(b) Number of neuropsychiatric workers (bureau)	40
(c) Number of wards contacted	25, 231
(1) Minors	12, 928
(2) Incompetents	12, 303
Total number of wards	47, 360
(a) Minors	25, 200
(b) Incompetents	22, 160
(1) In institutions	12, 424
(2) Not in institutions	9, 736
Total number of fiduciaries	36, 486
(a) Guardians of minors	17, 199
(b) Guardians of incompetents	19, 287
Total number of institutional awards	7, 977
(a) Number in which guardians have been appointed	6, 689
(b) Number in which guardians have not been appointed	1, 288
Total number of legal custodians	2, 114
(a) Custodians of minors	2, 108
(b) Custodians of incompetents	6
Number of individuals acting as guardians	29, 952
Number of banks or trust companies acting as guardians	2, 272
Number of banks or trust companies acting as guardians of estate— individuals as guardians of person	354
Number of banks or trust companies acting as guardians of person and estate of more than 5 wards	134
Number of individuals acting as guardians of person and estate of more than 5 wards	66
Annual accounts of fiduciaries:	
(a) Number due	43, 683
(b) Number rendered	42, 632
(c) Number delinquent	1, 051
(d) Number approved by regional attorneys	36, 092
(e) Number disapproved by regional attorneys	3, 099
(f) Number approved by courts over protest of regional attorneys	91
(g) Number of cases wherein violation of law has been noted	1, 616
Adjustments and prosecutions involving estates of wards:	
(a) Number adjusted out of courts	2, 121
(b) Number prosecuted in State courts	247
(c) Number prosecuted in Federal courts	33

FINANCE SERVICE

The net disbursements for all purposes during the fiscal year ended June 30, 1927, aggregate \$405,348,447.70, which represents a decrease of \$30,756,726.66 from those of the preceding fiscal year. This decrease is accounted for largely by the reduction in rehabilitation activities, the expenditures for which total \$2,206,256.01, as compared with \$25,840,552.23 for the fiscal year 1926. A material decrease occurred in disbursements from the appropriation "Military and naval insurance," due to the fact that lump-sum payments to the estates of insured veterans reached a normal level during this year. Another noteworthy reduction occurred in disbursements for administrative expenses out of the appropriation "Salaries and expenses," which decreased from \$42,163,937.46 in 1926 to \$36,354,328.90 for this year.

The net disbursements made from all appropriations during the fiscal years 1926 and 1927 are shown below in comparative form:

Appropriation	Fiscal year 1926	Fiscal year 1927
Salaries and expenses	\$42, 163, 937. 46	\$36, 354, 328. 90
Printing and binding	136, 129. 30	127, 184. 47
Administrative expenses, World War adjusted compensation act, 1924-25	26, 060. 38	8. 13
Increase of compensation	1 3, 183. 06	1 20. 00
Claims for damages, act December 28, 1922		1, 064. 45
Losses on war-risk insurance on American vessels, their cargoes, etc	1 33, 583. 69	
Military and naval family allowance	1 7, 239. 73	1 87, 218. 82
Military and naval compensation	164, 437, 139. 42	173, 476, 965. 39
Medical and hospital services	31, 197, 947. 20	31, 554, 979. 19
Hospital facilities and services	4, 511, 172. 04	4, 599, 257. 84
Vocational rehabilitation	25, 840, 552. 23	2, 206, 256. 01
Relief of John T. Wilson	12, 153. 00	
Relief of Immaculate Carlino, widow of Alexander Carlino		5, 000. 00
Relief of Albert J. Hosley		4, 000. 00
Judgments, Court of Claims		11, 387. 72
Adjusted service and dependent pay	5, 626, 183. 46	9, 969, 630. 34
Adjusted service certificate fund	15, 354, 526. 61	14, 407, 783. 32
Military and naval insurance	136, 975, 113. 97	120, 968, 998. 81
Soldiers and sailors civil relief claims, 1923		1 110. 64
TRUST FUNDS		
United States Government life insurance fund	9, 882, 287. 93	11, 864, 371. 29
Vocational rehabilitation special fund (gift)	1 70. 63	
Army allotments	1 12, 326. 24	1 88, 973. 71
Navy allotments	1 1, 480. 36	1 10, 612. 16
Marine Corps allotments	1 137. 00	1 787. 83
Coast Guard allotments	1 17. 33	1 45. 00
Total expenditures	436, 105, 174. 36	405, 348, 447. 70

1 Credit.

The above figures include allotments of \$5,111,105.10 and \$4,496,318.97 made during the fiscal years 1926 and 1927, respectively, to the United States Public Health Service, National Homes for Disabled Volunteer Soldiers, and the War, Navy, and Interior Departments for the care and treatment of bureau beneficiaries in hospitals operated by these Government agencies.

While the amount of loans made on adjusted-service certificates is not included in the foregoing table, the cost of administering these loans is included along with other operating expenses. In other

words, the reduction in the total operating expenses of the bureau has been sufficiently large to absorb the cost of administering this new function and still show a decrease over the expenditures for the preceding fiscal year.

During the period April 1 to June 30, 1927, the bureau made a total of 225,912 loans on adjusted-service certificates, to the amount of \$20,963,977.12, while for the six months' period January through June, 1927, banks made a total of 464,468 loans, aggregating in amount \$43,535,478.07.

Investments of the United States Government life-insurance funds during this year amounted to \$55,250,987.79, as compared with \$43,592,987.81 for the fiscal year 1926. Loans from the vocational rehabilitation revolving fund during this year were reduced to \$2,131.83, as compared with \$49,909.78 for the prior fiscal year.

The percentage distribution of all disbursements made during the fiscal year 1927, as compared with that for 1926, is given in the following table. These figures represent disbursements only and when all encumbrances for this year are recorded slight changes will occur. Included in the salaries for field offices are salaries paid the professional and technical personnel at clinics, which should be eliminated from administrative overhead. Deducting the salaries of this personnel at field offices the percentage for this item is materially lower.

	1927	1926
Salaries:		
Hospitals	3.57	3.55
Field offices	3.10	3.62
Central office	1.59	1.64
Administrative expenses (other than salaries)	.70	.89
Total	8.96	9.70
Vocational rehabilitation:		
Training allowances	.46	5.39
Other training expenses	.09	.53
Medical and hospital expenses (other than salaries)	7.78	7.15
Hospital facilities and services (construction)	1.13	1.03
Compensation	42.80	37.71
Term insurance	29.84	31.41
United States Government life insurance	2.93	2.27
Adjusted service and dependent pay	2.46	3.52
Adjusted service certificate fund	3.55	1.29

The total amount appropriated thus far for the fiscal year 1928 is \$545,865,000 (including \$72,465,000 estimated to be expended for United States Government life insurance from receipts). It is expected, however, that a deficiency in the amount of \$55,000,000 will be required in the appropriation "Military and naval compensation, 1928." Appropriations for the fiscal year 1927 total \$462,965,000, and, due to the failure in Congress of the second deficiency bill for that year, it has been necessary to utilize, in lieu of the \$35,000,000 included therein under "Military and naval compensation," approximately \$33,175,000 from the 1928 appropriation for this purpose. These amounts, together with the expenditure of \$67,023,050 for United States Government life insurance from receipts, show a total appropriation of \$563,163,050 for the fiscal year 1927, as compared with \$567,690,000 (excluding the amount of accrued deficiency) for the fiscal year 1928. The appropriations for all purposes for the fiscal year 1929 have been conservatively estimated at \$560,060,000.

CONSTRUCTION DIVISION

During this fiscal period plans and specifications were completed for 132 separate projects, having a total value of \$4,042,044. At the close of the year work was in progress on 21 other major projects, totaling \$1,829,383, which were on the average 25 per cent complete, or equivalent in amount to \$487,345. In other words, the total value of the projects for which plans and specifications were completed, or in process of preparation, was \$5,871,427.

In the matter of accomplishments during the year on construction projects, generally in excess of \$2,000, from current fiscal funds, the total work actually completed represented an outlay of \$799,721; work under contract, \$1,373,312; and work approved but not yet started, \$1,138,978. Included in the work actually completed are the following major projects at United States veterans' hospitals: (a) Administration and clinic building at Washington, D. C.; (b) kitchen and mess building at Perry Point, Md.; (c) recreation building at Augusta, Ga.; (d) covered walks at Camp Custer, Mich.; (e) dairy barn at St. Cloud, Minn.; (f) recreation building at Aspinwall, Pa.; and (g) central heating plant at Sheridan, Wyo. The following major projects are included in the amount shown for work under contract: (a) Officers' quarters and receiving building of 165 beds at Oteen, N. C.; (b) remodeling buildings for doctors, nurses, and attendants at Augusta, Ga.; (c) continued treatment building and attendants' quarters at Northampton, Mass.; (d) recreation building, storehouse, and shop buildings, greenhouse, residence for medical officer in charge, gate lodge, and covered walks at Sunmount, N. Y.; (e) covered walks at Sheridan, Wyo.; (f) enlarging infirmary kitchen at Legion, Tex.; and (g) attendants' quarters at Livermore, Calif.

In addition there was completed during this period the following work from funds acquired under special construction acts: (a) Two hundred and ninety additional neuropsychiatric beds at North Chicago, Ill., at a cost of \$637,555; (b) buildings and utilities for 159 tuberculous patients and officers' quarters at Hot Springs, S. Dak., at a cost of \$543,000; and (c) a new 540-bed hospital, with facilities for tuberculous, general medical and surgical, and neuropsychiatric patients, at Minneapolis, Minn., at a cost of \$1,732,650.

Projects in course of execution at the close of this period under special construction acts include the erection from the ground up of a 1,000-bed neuropsychiatric hospital at Northport, Long Island, and 350-bed neuropsychiatric hospital at Bedford, Mass. Plans and specifications have been completed for a new 250-bed tuberculosis hospital at Tucson, Ariz., to replace the temporary facilities now at that location. The necessary plans are in progress for a 300-bed hospital at Portland, Oreg., to replace the leased facilities now operated at that location, and also for the erection of a building at Fargo, N. Dak., to house the activities of the regional office and provide 50 hospital beds for observation cases.

During this year the bed capacity of a number of neuropsychiatric hospitals of the bureau has been reallocated by a slight reduction in square footage allowance in dormitories and day rooms, taking into account the facilities at recreational buildings, occupational therapy buildings, etc. This has been done with due respect to cubic air space which proper sanitation demands for each patient. This procedure permits of greater utilization of existing facilities without the necessity of further hospital construction.

The designs for heating, plumbing, and electrical equipment have received careful check and the latest practices in construction have been followed. Economies have been adopted in heating calculations which will result in a net saving of approximately 5 per cent of the radiation in buildings. Studies regarding electrical refrigeration have been continued and a policy has been adopted to provide automatic electric refrigerators for officers' quarters, ward kitchens, etc., with corresponding reductions in the size of the main refrigerating plant.

Close supervision has been maintained, as in the past, over the operation of station utilities through a review and study of the detailed reports forwarded periodically to central office. The policy of inspecting boilers annually has been continued, and arrangements have been made for the periodical inspection of all electric passenger and freight elevators at the various bureau hospitals.

Special consideration has been given during this period to the beautification of the grounds at hospitals, including grading, seeding, and the planting of trees and shrubbery. This has resulted in marked improvement in the physical appearance of grounds and approach to hospitals.

During this year 6,515 maintenance and repair requests were received from field stations, covering new construction and supplies for maintenance repairs and minor alterations to buildings, mechanical equipment, and the upkeep of grounds.

SUPPLY SERVICE

THE PURCHASE, DISTRIBUTION, AND HANDLING OF EQUIPMENT AND SUPPLIES

During the fiscal year 1927 there were received in central office from field stations 26,516 requisitions for materials, supplies, and equipment, including repairs thereto, to the value of \$4,968,086. The handling of these requisitions necessitated the issuance of 798 circular advertisements; the soliciting of proposals from 15,640 prospective bidders; the issuance of 18,684 purchase orders, 13,695 letters of authority to purchase, and 8,114 shipping orders; and the awarding of 2,135 contracts. Of the total amount expended to fill field requisitions, approximately \$65,000 was disbursed for recreational equipment and \$46,000 for books, magazines, and other publications.

In addition to the foregoing the bureau field supply depots received direct from field stations a total of 8,643 requisitions for supplies and equipment valued at \$2,260,659. Incoming shipments to supply depots, covering stock replenishments, surplus supplies from other Government agencies, and those returned by discontinued bureau stations, were valued at \$1,163,294. Savings amounting to approximately \$80,000 were effected by reclaiming old lumber and packing materials and by reconditioning old equipment. The sum of \$21,271 was realized through the sale of scrap gold salvaged by bureau dental clinics. A reduction of approximately \$60,000 per annum in the operating expenses of supply depots will result during the fiscal year 1928 through the closing on June 30, 1927, of the depot at Long Island City, N. Y.

During this period 148 contracts to the value of \$1,248,309 were executed under the centralized plan of purchasing subsistence stores for bureau hospitals. Contracts were also entered into with seven commercial warehouses, advantageously located, for the storing and redistribution of consolidated carload shipments to hospitals. In addition, the bureau supply depot at Chicago, Ill., is being utilized for storing and distributing supplies of a staple character. It is expected, however, to reduce the number of points of distribution from eight to four at the beginning of the coming fiscal year.

With regard to the transportation of supplies and equipment, 6,247 carload and 1,477 less-than-carload shipments were routed and 6,850 bills covering transportation charges were audited. There were 18,427 purchase orders reviewed for routing, correct freight or express address, and to designate the method of transportation. Savings amounting to \$10,194 were effected by the use of water transportation. Investigation was made of 2,711 loss and damage claims, resulting in a deduction of \$2,295 from the original bills as submitted by the common carriers, and a further saving of \$8,650 was effected by investigation of duplicate and miscellaneous receipts and land-grant deductions and overcharges. Considerable economy in trans-

portation expense was accomplished by the shipment on Army transports of 12 consignments to bureau activities at San Juan, P. R., Honolulu, Hawaii, and Manila, P. I.

In connection with the handling of property, considerable progress has been made during this year with regard to the final settlement of vocational trainees' property accounts and field property audits. Approximately 10,000 trainees' property accounts, dating as far back as 1919, have received final settlement, resulting in the recovery of money and property totaling \$126,875. Property audits have been made of 35 field stations and their accounts brought to a current basis by means of physical inventories. Surplus property transferred to other Government agencies amounted to \$1,837,625, including approximately \$140,000 for the Mississippi flood relief. This property was largely Army surplus and trainees' supplies and equipment. Surplus property sold by field stations and supply depots amounted to approximately \$100,000. Approximately 206,000 property vouchers were received, examined, and filed in connection with losses, expenditures, reports of survey, inventory and inspection reports, property found on stations, and the transfer of property from one station to another.

PERSONNEL ACTIVITIES

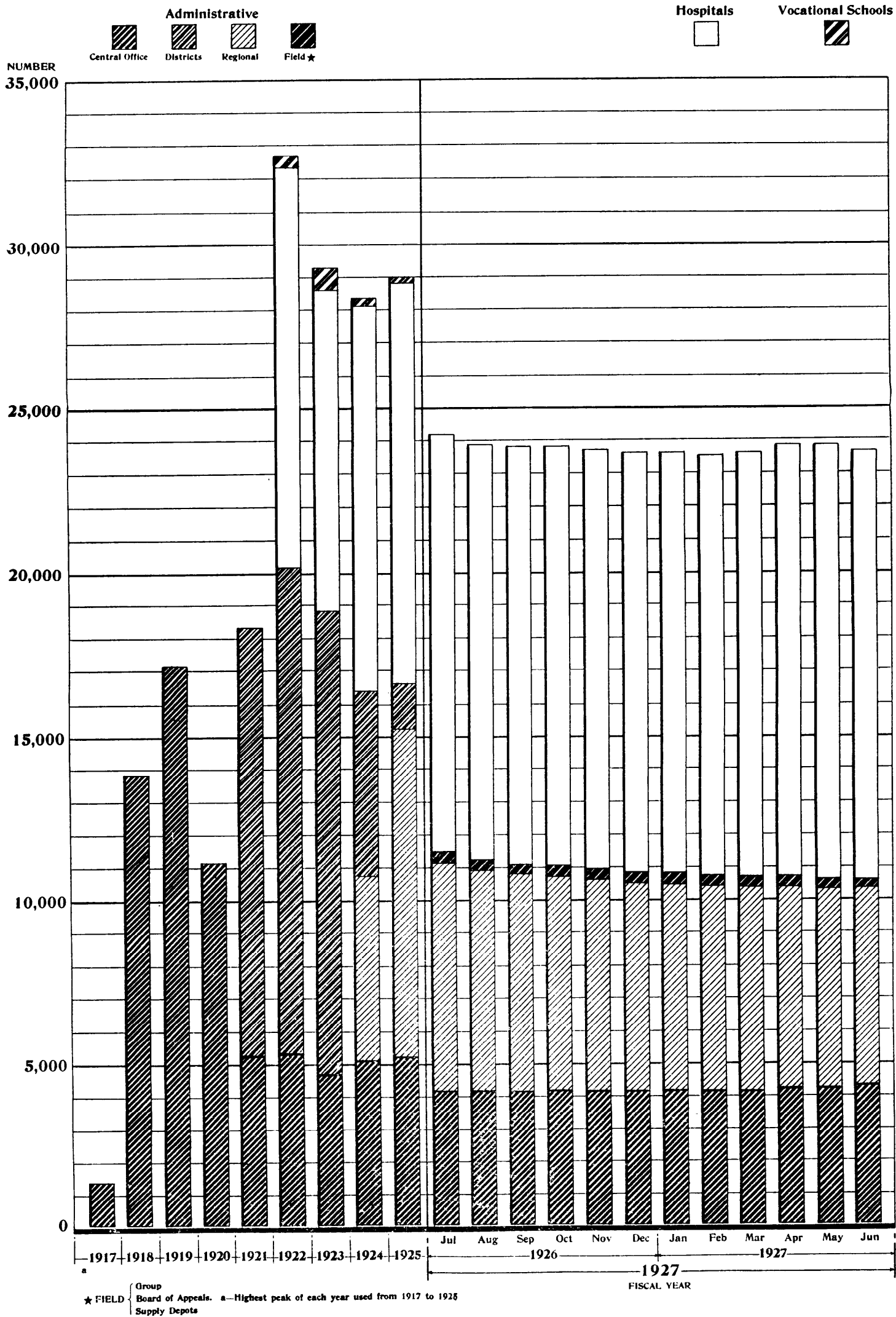
At the start of this fiscal year there were 24,397 employees on the bureau's rolls, whose aggregate annual salaries (including allowances, but excluding the compensation paid per diem and per hour personnel) totaled \$40,134,173, as compared with 23,696 employees and \$38,939,054 in annual salaries at the expiration of this period. In other words, there was a net reduction of 701 employees and \$1,195,119 in annual salaries.

During this period the personnel in central office increased from 4,212 to 4,338, and the annual pay roll from \$7,387,458 to \$7,593,528. This represents a net increase of 126 in the total employees and \$206,070 in annual salaries. Increased activities in the matter of insurance and those incident to adjusted-service loans were responsible for this condition.

In regional and allied field offices there was a net reduction of 1,136 employees and \$1,847,156 in annual salaries. The total personnel assigned to these offices on June 30, 1927, was 6,013 and the annual pay roll \$11,602,877, as compared with 7,149 employees and \$13,450,033 in annual salaries on June 30, 1926. In other words, the personnel on duty at these field stations decreased 16 per cent during this fiscal period. The factors which contributed principally to this material reduction in personnel were as follows: (a) Decrease in vocational rehabilitation activities; (b) falling off in the number of medical examinations by reason of fewer applicants for compensation benefits and the increase in the number of permanent disability ratings, thereby eliminating the necessity for frequent medical reexaminations; and (c) putting into effect definite specifications for field positions, resulting in the abolition of certain heretofore established positions and the surplusage of employees in those positions when not qualified or required for other assignments.

In connection with the personnel on duty at bureau hospitals, there were on July 1, 1926, 12,662 employees, with aggregate annual

U. S. VETERANS BUREAU
PERSONNEL



salaries of \$18,530,487, as compared with 13,079 employees and \$19,180,464 on June 30, 1927. This increase of 417 employees and \$649,977 in salaries is due entirely to the opening of the new bureau hospital at Minneapolis, Minn., and the operation of additional facilities at five (5) other bureau hospitals.

Other bureau activities, such as supply depots, central board of appeals, and territorial areas, effected reductions in personnel during this year. The total personnel assigned to these activities on June 30, 1926, was 374, with aggregate annual salaries of \$766,195, as compared with 266 employees and \$562,185 in annual salaries on June 30, 1927. This represents a reduction of 108 employees and \$204,010 in the total annual pay roll.

The policy established at bureau hospitals during the fiscal year 1926 providing for the decentralization of employment matters relating to chefs, cooks, and attendant personnel was extended during this year to include all classified employees, with the exception of professional, technical, and certain staff personnel. This same authority has also been granted regional offices. Since the adoption of the aforementioned policy, delays respecting the appointment and discontinuance of employees have been minimized and it has been possible to eliminate certain records heretofore maintained in central office.

During the fiscal year 1926 charts of organization were issued for bureau hospitals. A new plan of organization for regional offices was approved during this year.

An executive order was issued during this year whereby bureau attorneys of all grades would be appointed upon noncompetitive examinations. This will result in a better standardization of the qualifications of attorneys in the different grades and raise the caliber of this class of personnel.

The bureau's policy to afford opportunities for employees to advance has been carefully observed during this year. An outstanding feature was the establishment of a school in central office for the training of employees for stenographic and typist positions. Classes were held after office hours and were well attended. Employees who received this training will be assigned to vacant positions, provided they can qualify under civil service. After the beginning of the stenographic classes it was decided that benefits could also be obtained by holding classes for the training of operators for comptometers and Elliott-Fisher bookkeeping machines, and the necessary arrangements were made with the commercial organizations concerned to train bureau employees who were interested.

Study of the morale problem among bureau personnel has continued. Action with reference to promotions, demotions, and discontinuances has been based on efficiency, length of service, military preference, etc. Before discontinuing employees who have become surplus to the needs of certain bureau activities, an effort has been made to place them elsewhere. This practice has resulted in the reassignment of a number of worthy employees.

A policy adopted last year has continued in effect, namely, that no employee in central office is promoted to the next higher grade unless he has the highest efficiency rating in the next lower grade

and has a proper civil-service status, exception to be made only when the higher position calls for a person with special, professional, or technical qualifications.

In making new appointments, and in effecting discontinuances on account of reduction programs, the policy of extending preference to ex-service employees has been carefully followed. The same preference has been extended in making promotions. Eliminating the so-called floating personnel in bureau hospitals, such as ward attendants, waiters, kitchen helpers, etc., 57.95 per cent of the total male employees on the rolls of the bureau on June 30, 1927, were ex-service and 10.97 per cent of the female personnel had such status. In other words, 34.26 per cent of the total permanent personnel of the bureau was ex-service on the above date.

STATISTICAL TABLES

MEDICAL TABLES

TABLE NO. 1.—Clinical laboratory classified tests in the United States Veterans' Bureau dispensaries for the fiscal years 1924, 1925, 1926, and 1927

Fiscal year	Blood				Urine	Feces, stomach, and duodenum	Sputum		Spinal fluid		Bacteriological				Typhoid and paratyphoid	Miscellaneous
	Comp. fix.	Counts	Chemical	Others			Tuberculosis	Others	Wassermann	Others	Pus exudation dis., others	Dark field	Throat smears and cult.	Others		
January to June, 1924.....	22,187	7,599	2,795	1,295	58,167	4,569	13,701	458	190	402	3,787	227	2,546	364	12	10,084
1925.....	39,329	12,349	5,287	2,816	106,197	10,230	26,336	755	306	581	4,657	411	8,162	324	49	5,566
1926.....	28,550	8,816	4,546	1,481	101,991	8,824	18,574	796	381	356	2,628	196	2,858	188	72	4,413
1927.....	23,987	8,142	4,542	1,644	122,867	6,418	16,348	412	397	197	1,776	144	1,215	100	1	3,006

TABLE NO. 2.—Clinical laboratory classified tests in the United States veterans' hospitals for the fiscal years 1924, 1925, 1926, and 1927

Fiscal year	Blood				Urine	Feces, stomach, and duodenum	Sputum		Spinal fluid		Bacteriological				Typhoid and paratyphoid	Miscellaneous
	Comp. fix.	Counts	Chemical	Others			Tuberculosis	Others	Wassermann	Others	Pus exudation dis., others	Dark field	Throat smears and cult.	Others		
January to June, 1924.....	20,915	22,758	11,415	7,108	60,570	19,826	106,639	5,067	944	2,596	2,149	374	9,299	3,724	3,503	9,051
1925.....	52,723	48,423	25,338	14,218	147,051	43,946	239,109	23,170	2,876	8,339	46,025	299	16,718	8,132	7,854	21,723
1926.....	55,862	62,304	32,835	21,730	169,844	46,581	194,912	22,074	4,323	12,710	7,628	370	23,044	7,232	12,816	34,273
1927.....	60,101	7,787	38,838	27,134	180,147	49,434	194,744	19,890	4,679	13,758	8,809	579	23,960	73,063	1,011	55,352

TABLE NO. 3.—*X-ray examinations in the United States Veterans' Bureau dispensaries for fiscal years 1924, 1925, 1926, and 1927, classified by type of examination*

Fiscal year	Number cases rayed	Total X-ray examinations	Chest	Cardio-vascular stripe	Gastro-intestinal tract	Uro-genital tract	Dental	Sinuses	Bones and joints	Foreign bodies	Miscellaneous
1924.....	120,690	132,213	49,359	6,601	7,622	1,526	17,636	6,287	38,761	1,810	2,611
1925.....	112,716	128,355	52,419	6,265	8,496	1,654	18,169	7,017	30,979	950	2,406
1926.....	93,992	114,997	46,407	7,331	7,803	1,523	15,973	5,358	27,174	810	2,618
1927.....	81,131	107,829	43,562	5,759	7,482	1,447	10,904	4,159	24,551	635	9,330

TABLE NO. 4.—*X-ray examinations in the United States veterans' hospitals for the fiscal years 1924, 1925, 1926, and 1927, classified by type of examination*

Fiscal year	Number cases rayed	Total X-ray examinations	Chest	Cardio-vascular stripe	Gastro-intestinal tract	Uro-genital tract	Dental	Sinuses	Bones and joints	Foreign bodies	Miscellaneous
1924.....	78,713	85,632	34,121	3,846	5,339	1,615	18,841	3,845	15,909	419	1,697
1925.....	92,304	97,765	43,537	4,777	6,395	2,161	19,217	4,259	15,511	353	1,555
1926.....	94,871	103,000	42,058	4,348	7,120	2,443	19,014	6,230	19,654	362	1,771
1927.....	97,298	114,256	43,421	3,961	9,025	2,518	19,225	5,408	20,436	503	9,759

TABLE NO. 5.—*Total out-patient medical service, by service rendered, for fiscal years 1924, 1925, 1926, and 1927*

Fiscal year	Treated	Treatments	Individuals examined	Examinations	Operations	Anesthetics	Sent to hospital	Hospital visits	Home visits
1924.....	763,789	1,703,317	-----	1,363,295	15,312	3,758	47,965	95,992	45,152
1925.....	568,097	1,257,967	-----	1,144,330	5,863	3,085	59,916	81,680	38,091
1926.....	346,968	1,044,124	331,947	936,744	4,289	2,177	67,871	49,259	35,063
1927.....	262,420	873,577	338,761	922,364	2,600	1,081	71,340	28,800	34,972

TABLE NO. 6.—*Classification of total examinations by kind of examination for fiscal years 1924, 1925, 1926, and 1927*

Fiscal year	General medical	Eye, ear, nose, and throat	Neuro-psychiatric	Tuberculosis	Surgical	Veneral and non-veneral	Medical X ray	Dental X ray	Physio-therapy	Dental	Total
1924.....	527,845	182,589	100,467	190,141	143,452	19,222	150,469	-----	13,406	35,704	1,363,295
1925.....	399,254	147,694	110,238	176,980	105,463	16,792	154,263	-----	9,572	24,074	1,144,330
1926.....	337,116	111,207	89,179	143,317	91,945	14,781	109,476	15,336	3,076	21,311	936,744
1927.....	374,684	94,475	76,210	138,060	86,905	10,684	104,818	15,180	2,111	19,237	922,364

TABLE No. 7.—Classification of total treatments by kind of treatment for fiscal years 1924, 1925, 1926, and 1927

Fiscal year	General medical	Eye, ear, nose, and throat	Neuro-psychiatric	Tuberculosis	Surgical	Vene-real and non-vene-real	Medical X ray	Dental X ray	Physio-therapy	Dental	Total
1924.....	568,495	191,409	43,627	70,051	78,645	16,586	3,781	-----	342,839	187,884	1,703,317
1925.....	389,019	153,953	38,584	60,994	64,228	11,872	2,314	-----	419,589	116,815	1,257,967
1926.....	250,548	115,485	40,042	93,002	53,156	11,441	4,306	828	381,589	93,727	1,044,124
1927.....	184,569	96,481	39,851	87,553	40,910	9,324	1,390	706	332,605	80,188	873,577

TABLE No. 8.—Total treatments divided into medical and dental, salary and fee, with per cent of fee, for the fiscal years 1924, 1925, 1926, and 1927

Fiscal year	Medical				Dental			
	Total	Salary	Fee	Per cent fee	Total	Salary	Fee	Per cent fee
1924.....	1,515,433	1,456,585	58,848	3.9	187,884	179,933	7,951	4.2
1925.....	1,141,183	1,099,089	42,093	3.7	116,815	111,103	5,712	4.9
1926.....	950,397	904,475	45,922	4.8	93,727	87,446	6,281	6.7
1927.....	793,339	718,298	75,091	9.5	80,188	72,998	7,190	9.0

TABLE No. 9.—Total examinations divided into medical and dental, salary and fee, with per cent of fee, for the fiscal years 1924, 1925, 1926, and 1927

Fiscal year	Medical				Dental			
	Total	Salary	Fee	Per cent fee	Total	Salary	Fee	Per cent fee
1924.....	1,327,591	1,273,547	54,044	4.1	35,704	33,111	2,593	7.3
1925.....	1,120,256	1,084,097	36,159	3.2	24,074	22,014	2,060	8.6
1926.....	915,433	886,972	28,461	3.1	21,311	19,830	1,481	6.9
1927.....	903,127	880,956	22,171	2.5	19,237	17,478	1,759	9.1

TABLE No. 10.—Physiotherapy activities in hospitals and dispensaries, fiscal year 1927

Different services	Mass-age	Electro-therapy	Hydro-therapy	Actinic ray	Thermo-therapy	Exercise	Total	Number of different patients treated
United States veterans' hospitals:								
Tuberculosis.....	60,760	45,105	3,181	454,324	70,677	47,427	681,474	20,788
Neuropsychiatric.....	35,395	57,961	313,007	73,873	135,321	539,298	1,154,855	55,621
General.....	58,611	88,265	95,597	144,015	156,200	49,279	616,987	24,334
U. S. Army hospitals.....	45,422	16,350	72,553	8,020	41,047	23,149	206,542	7,247
U. S. Navy hospitals.....	13,315	17,216	13,489	9,210	16,658	13,061	82,949	4,085
National soldiers' homes.....	14,199	13,677	6,346	47,639	19,681	50,369	151,911	6,979
United States veterans' dispensaries.....	48,166	65,703	33,586	82,856	74,365	20,673	325,349	25,399
Total.....	300,869	304,297	537,759	819,937	513,949	743,256	3,220,067	144,453
Average monthly.....	25,072	25,358	44,813	68,328	42,829	61,938	268,338	12,038

TABLE NO. 11.—*Regional nursing activities for the fiscal years 1925, 1926, and 1927*

Fiscal year	Number of nurses on duty at end of year	Number of beneficiaries newly assigned during the year				Number of beneficiaries released from supervision during the year				Number of beneficiaries remaining under supervision at end of year				Number of home visits	Number dispensary treatments	Number miscellaneous interviews	Number reports made
		Tuber- culosis	Neuro- psychi- atric	General medical and surgical	Total	Tuber- culosis	Neuro- psychi- atric	General medical and surgical	Total	Tuber- culosis	Neuro- psychi- atric	General medical and surgical	Total				
1925.....	245	38,908	21,678	82,457	143,133	44,445	24,672	96,754	165,871	17,271	8,377	11,852	37,500	140,395	319,204	209,271	148,000
1926.....	188	23,646	10,121	29,549	63,316	21,794	12,212	31,755	65,761	17,987	5,462	5,473	28,922	108,075	201,733	110,272	102,820
1927.....	149	19,423	4,034	5,111	28,568	20,392	6,889	6,021	33,302	13,894	1,795	2,325	18,014	86,672	120,933	62,490	83,202

TABLE NO. 12.—*Distribution of patients receiving occupational therapy and classification of hours given to each subject in United States veterans' and contract hospitals for fiscal years 1925, 1926, and 1927*

Fiscal year	Textile		Reed and cane		Woodworking		Leather and bookbinding		Cement and plastic		Drawing and painting	
	Patients	Hours	Patients	Hours	Patients	Hours	Patients	Hours	Patients	Hours	Patients	Hours
1925.....	31,152	974,200	19,560	612,765	12,564	508,886	19,776	436,385	1,176	65,427	5,088	149,754
1926.....	29,330	930,276	17,222	541,259	13,009	512,635	21,583	498,947	1,071	44,541	5,730	143,680
1927.....	24,918	904,835	13,424	457,879	11,221	535,773	21,842	545,305	1,032	39,434	4,969	118,501

Fiscal year	Academic		Commercial		Agriculture		Metal work		Other occupational therapy subjects		Total	
	Patients	Hours	Patients	Hours	Patients	Hours	Patients	Hours	Patients	Hours	Individual patients	Hours
1925.....	12,840	270,439	11,268	238,561	9,048	471,766	2,328	82,659	13,152	636,090	130,752	4,447,932
1926.....	9,292	203,523	45,026	202,913	9,892	584,760	1,401	52,905	14,626	692,584	126,112	4,408,023
1927.....	6,251	136,265	6,701	160,015	10,653	714,419	1,180	45,763	11,753	496,215	109,496	4,154,404

TABLE No. 14.—Admissions to all hospitals by fiscal year 1920-1927

Fiscal year	Groups of hospitals		
	Government	State and civil	Total
1920	23, 623	19, 610	43, 233
1921	48, 070	43, 370	91, 440
1922	86, 392	47, 962	134, 354
1923	59, 451	23, 363	82, 814
1924	51, 652	12, 401	64, 053
1925	68, 474	8, 338	76, 812
1926	64, 279	5, 162	69, 441
1927	69, 145	2, 822	71, 967
Total	471, 086	163, 028	634, 114

TABLE NO. 15.—Admissions of United States Veterans' Bureau patients by beneficiary, groups of hospitals, and type of patient, fiscal year 1927

Class of beneficiary	United States veterans				Other Government				State and civil				All hospitals			
	Tuber- culosis, pulmo- nary	Neuro- psychi- atric	General	All dis- eases and condi- tions	Tuber- culosis, pulmo- nary	Neuro- psychi- atric	General	All dis- eases and condi- tions	Tuber- culosis, pulmo- nary	Neuro- psychi- atric	General	All dis- eases and condi- tions	Tuber- culosis, pulmo- nary	Neuro- psychi- atric	General	All dis- eases and condi- tions
United States veterans' of World War.....	11,536	7,292	19,871	38,699	3,896	3,044	19,561	26,508	852	802	1,114	2,768	16,286	11,138	40,546	67,970
Compensable disability.....	8,336	4,864	8,571	21,771	3,151	1,689	7,654	12,494	741	774	801	2,316	12,228	7,827	17,026	36,581
Noncompensable disability.....	3,200	2,428	11,300	16,928	747	1,355	11,907	14,009	111	28	313	452	4,058	3,311	23,520	31,389
United States veterans of wars, occupations rebellions (previous to World War).....	291	199	1,200	1,690	148	159	1,946	2,253	6	3	45	54	445	361	3,191	3,997
Boxer rebellion.....	1	1	3	5	1	2	4	5					2	1	7	10
Cuban pacification.....	5	2	1	8		8	2	12					7	10	3	20
Nicaraguan campaign.....					1		1	2					1		1	2
Philippine Insurrection.....	22	11	97	130	8	10	155	173	5		23	28	35	21	275	331
Punitive expedition into Mexico.....	9	3	10	22	2		15	17					11	3	25	39
Spanish-American War.....	244	175	1,003	1,432	132	132	1,580	1,844	1	3	22	26	377	310	2,605	3,292
Vera Cruz expedition.....	4		3	7	2		4	6					6		7	13
Civil War.....	3	7	63	73		8	162	160					3	15	215	233
Other wars, expeditions, and occupations.....	3		20	23		1	33	34					3	1	53	57
Allied veterans.....	73	43	115	231	20	33	182	235	5	7	17	29	96	83	314	495
British.....	9	6	3	18	3	6	19	28	1	1	1	3	13	13	23	49
Canadian.....	64	34	110	208	16	27	162	205	4	6	13	23	84	67	285	436
All others.....		3	2	5	1		1	2			3	3	1	3	6	10
Miscellaneous.....	60	57	256	373	7	6	15	28	15	1	5	21	82	64	276	422
Employees, U. S. Veterans' Bureau.....	7	5	150	162			1	1					7	5	151	163
Employees' Compensation Commission.....	5	1	13	19									5	1	13	19
Emergency.....	46	48	49	143	7	6	14	27	9	1	5	15	62	55	68	185
All other beneficiaries.....	2	3	44	49					6			6	8	3	44	55
Grand total.....	11,990	7,591	21,442	40,993	4,073	3,242	21,704	29,019	878	813	1,181	2,872	16,911	11,646	44,327	72,894

TABLE NO. 16.—Admissions of United States Veterans' Bureau patients, by branch of service and type of admission, fiscal year 1927

Branch of service	Pulmonary tuberculosis				Psychotic				Nervous and endocrines				General medical and surgical				Grand total			
	First admission	Admission by transfer	Readmission	Total	First admission	Admission by transfer	Readmission	Total	First admission	Admission by transfer	Readmission	Total	First admission	Admission by transfer	Readmission	Total	First admission	Admission by transfer	Readmission	Total
U. S. Veterans' Bureau	3,773	863	7,191	11,827	1,077	927	1,589	3,593	1,309	187	2,402	3,898	10,107	493	10,471	21,071	16,266	2,470	21,653	40,389
U. S. Marine	61		121	182	10	1	8	19	58		80	138	1,143	4	846	1,963	1,272	5	1,055	2,332
U. S. Army	550	47	1,078	1,675	128	2	103	233	367	8	490	865	4,336	42	3,446	7,824	5,381	99	5,117	10,597
U. S. Navy	231	2	428	661	94	1	77	172	645	3	718	1,366	5,341	10	4,280	9,631	6,311	16	5,503	11,830
U. S. Interior Department (St. Elizabeths)					8	17	16	41									8	17	16	41
National homes for disabled volunteer soldiers	538	33	957	1,528	66	4	53	123	101	1	144	246	1,145	13	901	2,059	1,850	51	2,055	3,956
State	1		7	8	137	17	221	375	12	1	21	34	2	7	9	152	18	256	426	
Civil	204	174	472	850	53	16	131	200	54	4	138	196	474	2	674	1,150	785	196	1,415	2,396
Total	5,358	1,119	10,254	16,731	1,573	985	2,198	4,756	2,546	204	3,993	6,743	22,548	564	20,625	43,737	32,025	2,872	37,070	71,967

NOTE.—Admissions of 495 allied veterans and 422 miscellaneous beneficiaries are excluded from this tabulation.

11499
67423
11499

TABLE NO. 17.—Admissions to hospitals of United States veterans of all wars without regard to nature or origin of their disability, as authorized in paragraph 10, section 202, World War veterans' act, 1924, revised, by type of beneficiary and groups of hospitals, fiscal years 1925-1927

Type of beneficiary	United States veterans			All other hospitals			Total			Grand total
	1925	1926	1927	1925	1926	1927	1925	1926	1927	
S. P. B. W.:¹										
World War.....	4, 100	5, 005	6, 329	1, 110	1, 531	2, 621	5, 210	6, 536	8, 950	20, 696
All others.....	606	525	536	456	306	344	1, 062	831	880	2, 773
W. O. E.:¹										
World War.....	3, 570	7, 380	10, 599	2, 502	7, 369	11, 840	6, 072	14, 749	22, 439	43, 260
All others.....	366	802	1, 154	533	1, 268	1, 963	899	2, 070	3, 117	6, 086
Total:										
World War.....	7, 670	12, 385	16, 928	3, 612	8, 900	14, 461	11, 282	21, 285	31, 389	63, 956
All others.....	972	1, 327	1, 690	989	1, 574	2, 307	1, 961	2, 901	3, 997	8, 859
Grand total.....	8, 642	13, 712	18, 618	4, 601	10, 474	16, 768	13, 243	24, 186	35, 386	72, 815

¹ S. P. B. W. admissions under first proviso; W. O. E. admissions under second proviso, par. 10, sec. 202, World War veterans' act, 1924, revised, as outlined in General Order 292.

TABLE NO. 18.—Admissions of United States Veterans' Bureau patients to all hospitals, by branch of service, type of patient, and sex and color, fiscal year 1927

Branch of service	Tuberculosis			Psychotic			Nervous and endocrines		
	Male		Fe-male	Male		Fe-male	Male		Fe-male
	White	Colored		White	Colored		White	Colored	
U. S. Veterans' Bureau.....	10, 936	796	95	3, 424	167	2	3, 726	147	25
U. S. Marine.....	171	11	—	18	1	—	127	9	2
U. S. Army.....	1, 491	173	11	212	21	—	808	52	5
U. S. Navy.....	600	61	—	162	10	—	1, 316	50	—
National soldiers' homes.....	1, 324	203	1	114	9	—	230	16	—
U. S. Interior (St. Elizabeths, Washington, D. C.).....	—	—	—	31	5	5	—	—	—
State.....	7	—	1	357	12	6	32	2	—
Civil.....	794	43	13	190	2	8	177	8	11
Total.....	15, 323	1, 287	121	4, 508	227	21	6, 416	284	43

Branch of service	General			Total			Grand total
	Male		Fe-male	Male		Fe-male	
	White	Colored		White	Colored		
U. S. Veterans' Bureau.....	19, 190	1, 770	111	37, 276	2, 880	233	40, 389
U. S. Marine.....	1, 739	241	13	2, 055	262	15	2, 332
U. S. Army.....	7, 144	615	65	9, 655	861	81	10, 597
U. S. Navy.....	9, 052	575	4	11, 130	696	4	11, 830
National soldiers' homes.....	1, 827	227	5	3, 495	455	6	3, 956
U. S. Interior (St. Elizabeths, Washington, D. C.).....	—	—	—	31	5	5	41
State.....	9	—	—	405	14	7	426
Civil.....	1, 060	43	47	2, 221	96	79	2, 396
Total.....	40, 021	3, 471	245	66, 268	5, 269	430	71, 967

NOTE.—Admissions of 495 allied veterans and 422 miscellaneous beneficiaries are excluded from this tabulation

TABLE NO. 19.—Yearly turnover of patients in United States veterans' hospitals operating during fiscal years 1920-1927

United States veterans' hospitals (type, number, and location)	Per cent turnover							
	1920	1921	1922	1923	1924	1925	1926	1927
TUBERCULOSIS								
24. Palo Alto, Calif.	307	301	291	(1)				
27. Alexandria, La.	759	541	391	213	220	349	322	377
41. West Haven, Conn.	322	286	194	232	161	192	145	134
50. Whipple, Ariz.		229	176	120	110	157	158	189
51. Tucson, Ariz.		519	229	184	168	170	181	150
55. Fort Bayard, N. Mex.		255	143	100	92	190	162	173
59. Tacoma, Wash.		292	213	178	130	(1)		
60. Oteen, N. C.		349	281	244	256	173	246	273
64. Camp Kearney, Calif. ¹		497	302	182	228	259	167	
68. Minneapolis, Minn.					538	150	127	133
72. Fort Harrison, Mont.				669	356	315	364	366
79. Outwood, Ky.				322	251	275	213	262
80. Fort Lyon, Colo.				121	134	197	203	198
85. Walla Walla, Wash.				211	134	121	129	142
89. Rutland Heights, Mass.					217	187	215	196
91. Tuskegee, Ala.					302	(1)		
93. Legion, Tex.					259	149	166	146
96. Sunmount, N. Y.						295	134	127
98. Castle Point, N. Y.						321	166	185
102. Livermore, Calif.							164	178
103. Aspinwall, Pa.							339	226
104. San Fernando, Calif.							440	146
All tuberculosis hospitals	428	329	239	198	216	212	204	203
NEUROPSYCHIATRIC								
24. Palo Alto, Calif.				333	99	112	60	39
27. Waukesha, Wis.	388	291	132	147	172	196	1 204	
42. Perry Point, Md.	271	423	229	237	166	108	90	60
44. West Roxbury, Mass.	301	230	127	129	76	105	57	50
49. Philadelphia, Pa.		198	110	83	60	77	67	34
57. Knoxville, Iowa		114	58	39	123	57	19	40
62. Augusta, Ga.		129	113	79	50	64	89	43
74. Gulfport, Miss.			480	379	277	255	277	354
78. North Little Rock, Ark.			399	81	38	111	72	57
81. Bronx, N. Y.				347	200	189	105	65
86. Sheridan, Wyo.				239	66	54	70	35
94. American Lake, Wash.					569	103	60	35
95. Northampton, Mass.					1,010	55	20	15
97. Chillicothe, Ohio.						247	118	72
100. Camp Custer, Mich.						217	58	18
101. St. Cloud, Minn.						175	33	12
105. North Chicago, Ill.							437	84
107. All neuropsychiatric hospitals	325	286	169	198	102	128	90	57
GENERAL								
32. Washington, D. C.	627	452	660	361	309	394	688	698
37. Waukesha, Wis.							1 400	436
48. Atlanta, Ga.	1,513	2,720	1,807	1,366	1,254	929	772	555
52. Boise, Idaho		451	313	328	502	410	480	666
53. Dwight, Ill.		319	346	283	701	649	481	735
59. Tacoma, Wash.						485	682	714
63. Lake City, Fla.		737	528	430	520	638	747	1,115
65. St. Paul, Minn.		889	813	726	820	934	771	805
67. Kansas City, Mo.		1,481	1,338	1,102	965	1,146	1,057	977
68. Minneapolis, Minn.		1,046	956	824	1,088	(1)		
69. Fort Thomas, Ky. ¹			353	603	654	1,160	1,200	
72. Fort Harrison, Mont.			555	(1)				

¹ The following changes were made in type of hospitals:

United States veterans' hospitals	From—	To—	Date
No. 24. Palo Alto, Calif.	Tuberculosis	Neuropsychiatric	April, 1923.
No. 72. Fort Harrison, Mont.	General	Tuberculosis	July, 1923.
No. 59. Tacoma, Wash.	Tuberculosis	General	May, 1924.
No. 91. Tuskegee, Ala.	do.	do.	August, 1924.
No. 68. Minneapolis, Minn.	General	Tuberculosis	November, 1923.
No. 37. Waukesha, Wis.	Neuropsychiatric	General	December, 1925.

¹ U. S. Veterans' Hospital No. 64, Camp Kearney, Calif., closed March, 1926; U. S. Veterans' Hospital No. 69, Fort Thomas, Ky., closed April, 1926.

TABLE No. 19.—Yearly turnover of patients in the United States veterans' hospitals operating during fiscal years 1920-1927—Continued

United States veterans' hospitals (type, number, and location)	Per cent turnover							
	1920	1921	1922	1923	1924	1925	1926	1927
Edw. Hines, jr., Maywood, Ill.			535	373	401	393	383	354
77. Portland, Oreg.			1,066	610	748	609	720	736
84. Algiers, La.			825	662	682	617	547	531
88. Memphis, Tenn.				699	802	979	1,037	1,100
90. Muskogee, Okla.					644	790	674	837
91. Tuskegee, Ala.						192	161	182
92. Jefferson Barracks, Mo.				1,244	757	577	545	603
99. Excelsior Springs, Mo.						378	458	686
106. Fort Snelling, Minn.								659
All general hospitals	899	827	531	619	581	574	561	609
All veterans' hospitals	442	569	323	304	291	267	239	244

TABLE No. 20.—Patients of the United States Veterans' Bureau under treatment in all hospitals, June 30, 1927, by class of beneficiary, groups of hospitals, and type of patient

Class of beneficiary	United States veterans				Other Government			
	Pulmonary tuberculosis	Neuropsychiatric	General	All diseases and conditions	Pulmonary tuberculosis	Neuropsychiatric	General	All diseases and conditions
United States veterans of World War	4,705	8,701	3,015	16,421	1,206	1,468	2,454	5,138
Compensable disability	3,065	7,367	1,296	11,748	1,021	1,273	1,090	3,384
Noncompensable disability	1,620	1,334	1,719	4,673	185	195	1,364	1,744
United States veterans of wars, occupations, and rebellions previous to World War	143	136	227	506	36	42	266	344
Boxer rebellion	1	3		4				
Cuban pacification	2	1		3	1	1	2	4
Nicaraguan campaign	1			1				
Philippine insurrection	8	6	22	36	2	2	7	11
Punitive expedition into Mexico	5	2	2	9	2	1	1	4
Spanish-American War	121	119	186	426	30	36	229	295
Vera Cruz expedition	2	1	2	5			1	1
Civil War	1	2	13	15		2	19	21
Other wars, expeditions, and occupations	2	2	3	7	1		7	8
Allied veterans	23	27	16	76	4	9	20	33
British	6	6	2	14		1	4	5
Canadian	26	18	14	58	4	7	16	27
All others	1	3		4		1		1
Miscellaneous	26	63	36	124	1	1	1	3
Employees, U. S. Veterans' Bureau	1		5	6				
Employees' Compensation Commission	6	1	1	8				
Emergency	18	57	15	90	1	1	1	3
All other beneficiaries		5	15	20				
Grand total	4,906	8,927	3,294	17,127	1,247	1,620	2,741	5,508

TABLE NO. 20.—*Patients of the United States Veterans' Bureau under treatment in all hospitals, June 30, 1927, by class of beneficiary, groups of hospitals, and type of patient—Continued*

Class of beneficiary	State and civil				All hospitals			
	Pulmonary tuberculosis	Neuro-psychiatric	General	All diseases and conditions	Pulmonary tuberculosis	Neuro-psychiatric	General	All diseases and conditions
United States veterans of World War.....	567	2, 188	148	2, 903	6, 478	12, 357	5, 617	24, 452
Compensable disability.....	506	2, 166	98	2, 770	4, 612	10, 806	2, 484	17, 902
Noncompensable disability.....	61	22	50	133	1, 866	1, 551	3, 133	6, 550
United States veterans of wars, occupations, and rebellions previous to World War.....	1	3	4	8	180	181	497	858
Boxer rebellion.....					1	3		4
Cuban pacification.....					3	2	2	7
Nicaraguan campaign.....					1			1
Philippine insurrection.....	1		3	4	11	8	32	51
Punitive expedition into Mexico.....					7	3	3	13
Spanish-American War.....		2	1	3	151	157	416	724
Vera Cruz expedition.....					2	1	3	6
Civil War.....					1	4	31	36
Other wars, expeditions, and occupations.....		1		1	3	3	10	16
Allied veterans.....	5	11	3	19	42	47	39	128
British.....	1	1		2	7	8	6	21
Canadian.....	4	10	3	17	34	35	33	102
All others.....					1	4		5
Miscellaneous.....		1	1	2	26	65	38	129
Employees, U. S. Veterans' Bureau.....					1		5	6
Employees' Compensation Commission.....					6	1	1	8
Emergency.....		1	1	2	19	59	17	95
All other beneficiaries.....						5	15	20
Grand total.....	573	2, 203	156	2, 932	6, 726	12, 650	6, 191	25, 567

TABLE NO. 21.—*Patients of the United States Veterans' Bureau under treatment in all hospitals, exclusive of United States possessions, by sex and color, at the close of each fiscal year, 1923-1927, inclusive*

Fiscal year	Both sexes			Male			Female white
	Total	White	Colored (black)	Total	White	Colored (black)	
1923.....	23, 611	22, 305	1, 306	23, 391	22, 085	1, 306	220
1924.....	21, 730	20, 568	1, 162	21, 490	20, 328	1, 162	240
1925.....	26, 610	24, 819	1, 791	26, 369	24, 578	1, 791	241
1926.....	24, 915	23, 252	1, 663	24, 738	23, 075	1, 663	177
1927.....	24, 965	23, 328	1, 637	24, 772	23, 135	1, 637	193

NOTE.—Includes United States veterans only.

TABLE 22.—Patients under treatment by the United States Veterans' Bureau in all hospitals, exclusive of United States possessions, by branch of service, type of patient, and home address (State), June 30, 1927

Type of patient and branch of service	Eastern area													Southern area											
	Massachusetts	Maine	New Hampshire	Rhode Island	Vermont	Connecticut	New York	New Jersey	Pennsylvania	Delaware	District of Columbia	Maryland	Virginia	West Virginia	Georgia	Florida	North Carolina	South Carolina	Tennessee	Louisiana	Alabama	Mississippi	Arkansas	Oklahoma	Texas
PULMONARY TUBERCULOSIS																									
U. S. veterans.....	245	16	25	26	9	79	633	172	283	3	44	40	65	48	91	65	121	32	50	118	93	84	81	105	255
U. S. Marine.....		3											2							2					
U. S. Army.....	3					4	9	7	9		13	4	2	1	10	2		2	3		6	2	23	5	84
U. S. Navy.....	9			1	1	2	4	1	10		11	5	2	2			1					1	1		
U. S. Interior (St. Elizabeths).....																									
Soldiers' homes.....	2	2		1			6		45	1	11	15	23	3	18	3	29	37	110	2	19	6	3	1	
State.....													3									1			
Civil.....	16	1		2		3	177	21	28			1	6	2		1	1	1	4					11	
Total.....	275	22	25	30	10	88	829	201	375	4	79	65	103	55	119	71	152	72	167	129	118	94	113	122	339
NEUROPSYCHIATRIC																									
U. S. veterans.....	482	57	38	72	24	115	639	176	935	22	29	167	54	60	242	107	171	104	191	183	198	98	151	126	336
U. S. Marine.....	1	2							3				3												
U. S. Army.....						1	4	1	7		13	6	8	8	1		5		2		2	2	5	1	38
U. S. Navy.....	22	2		3	1	4	31	5	17		1	1	1	1			2							1	
U. S. Interior (St. Elizabeths).....	8		1	2		4	28	9	51	1	90	27	43	8	3	3	1	2	6	6	2	1	2	2	5
Soldiers' homes.....		1					8	2	44				9	2	4	1	5		7	5	2	1	1	2	7
State.....	90	3		3	4	66	835	153	58	3	1	2	119	41	2		3	1	1	2	2	16		17	
Civil.....	2	1				1	4	46	10						1	3								1	
Total.....	605	68	39	80	29	191	1,549	392	1,125	26	135	202	237	120	253	114	184	110	207	196	206	117	159	149	387
GENERAL																									
U. S. veterans.....	19	3	1	3	1	4	55	17	64	3	21	23	16	14	170	102	52	48	98	129	95	59	64	132	88
U. S. Marine.....		25					33		44				20		6	1		1	1	7				1	
U. S. Army.....	8	1	1			3	23	1	29	1	85	56	53	53	6	2	16	4	6	5	10	3	78	15	99
U. S. Navy.....	133	4	28	15	11	28	150	41	139	4	32	14	34	12	2		29	3	1	2	4		1	1	1
U. S. Interior (St. Elizabeths).....									1																
Soldiers' homes.....			3				2	2	6		1	4	11		1		1	4	5	2	1	1	2	1	3
State.....	2						2		1					3											

Civil.....	1	1				4	9	3	3			1	2	2										2	
Total.....	163	34	33	18	12	39	274	64	287	8	139	97	140	85	187	105	98	60	111	145	110	63	145	150	193
ALL PATIENTS																									
U. S. veterans.....	746	76	64	101	34	198	1,327	365	1,282	28	94	230	135	122	503	274	344	184	339	430	386	241	296	363	679
U. S. Marine.....	1	30					33		47				25		6	1		1	9					1	
U. S. Army.....	11	1	1			8	36	9	45	1	111	66	68	62	17	4	21	6	11	12	18	7	11	21	221
U. S. Navy.....	164	6	28	19	13	34	185	47	166	4	44	19	37	14	2		32	3	1	2	4	1	2	2	1
U. S. Interior (St. Elizabeths).....	8	2	1	2		4	28	9	52	1	90	27	43	9	3	3	1	2	6	6	2	1	2	2	5
Soldiers' homes.....	2	3	3	1			16	4	95	1	13	19	43	5	23	4	35	41	122	9	22	7	6	4	10
State.....	92	3		3	4	66	837	153	59	3	1	2	122	44	2		3	1	2	2	17			17	
Civil.....	19	3		2		8	190	70	41			1	7	4	3	4	1	2	4					11	3
Total.....	1,043	124	97	128	51	318	2,652	657	1,787	38	353	364	480	260	559	290	434	242	485	470	434	274	417	421	919

Type of patient and branch of service	Central area													Western area											Total		
	Ohio	Indiana	Kentucky	Illinois	Michigan	Wisconsin	Missouri	Iowa	Nebraska	Minnesota	North Dakota	South Dakota	Kansas	Montana	Colorado	New Mexico	Utah	Wyoming	California	Arizona	Washington	Idaho	Oregon	Nevada		Miscellaneous	
PULMONARY TUBERCULOSIS																											
U. S. veterans.....	98	93	91	248	48	23	170	57	7	265	22	23	57	40	58	41	3	3	379	116	116	16	63	4	24	4,848	
U. S. Marine.....		1			1																					9	
U. S. Army.....	10	9	6	16	2	7	14	7	11	4	3	4	12	1	96	5	2	4	9	3	2		2		4	434	
U. S. Navy.....		1		4	1														1						2	59	
U. S. Interior (St. Elizabeths).....																										0	
Soldiers' homes.....	69	28	16	64	35	71	12	5	2	6	1	17	5	2	2	1	1	1	57	2				1	2	737	
State.....										1																5	
Civil.....	2	2	1	5	111		2			1							1		1						2	403	
Total.....	179	134	114	337	198	101	198	69	20	277	26	44	74	43	156	47	7	8	447	121	118	16	65	5	34	6,495	
NEUROPSYCHIATRIC																											
U. S. veterans.....	296	50	114	673	446	62	332	192	68	326	56	61	99	87	102	40	34	34	419	26	246	59	117	11	110	8,837	
U. S. Marine.....		1																								10	
U. S. Army.....			1	2	2		1		1	2		1		1	30			5	46		1	1			1	199	
U. S. Navy.....	6	6	2	56	8	4	2							1					10						1	187	
U. S. Interior (St. Elizabeths).....	8	1	8	2	4	5	2	2	1	1				1					3						17	371	
Soldiers' homes.....	155	211	65	61	12	18	30	10	11	24	4	6	19	3					7		1	2			3	743	

TABLE 22.—Patients under treatment by the United States Veterans' Bureau in all hospitals, exclusive of United States possessions, by branch of service, type of patient, and home address (State), June 30, 1927—Continued

Type of patient and branch of service	Central area												Western area												Miscellaneous	Total
	Ohio	Indiana	Kentucky	Illinois	Michigan	Wisconsin	Missouri	Iowa	Nebraska	Minnesota	North Dakota	South Dakota	Kansas	Montana	Colorado	New Mexico	Utah	Wyoming	California	Arizona	Washington	Idaho	Oregon	Nevada		
NEUROPSYCHIATRIC—continued																										
State.....	3	2	7	254	5	210	1	1	2	36	1	2	-----	1	-----	-----	-----	-----	20	4	2	-----	1	1	11	1,985
Civil.....	1	1	-----	-----	1	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	1	-----	1	53	-----	1	2	-----	-----	4	134
Total.....	468	272	197	1,048	478	299	368	205	83	389	61	70	120	92	137	41	35	40	558	30	252	66	118	12	147	12,466
GENERAL																										
U. S. veterans.....	20	46	34	412	81	107	193	44	31	309	33	30	54	106	10	3	7	3	49	34	152	58	123	10	4	3,242
U. S. Marine.....	26	9	20	-----	13	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	1	-----	-----	-----	-----	-----	-----	208
U. S. Army.....	10	7	4	18	5	4	13	8	9	4	2	5	9	12	127	15	6	29	274	19	3	5	1	3	4	1,159
U. S. Navy.....	7	22	1	102	6	4	3	-----	1	1	-----	-----	2	-----	-----	-----	-----	-----	106	2	-----	-----	1	1	2	960
U. S. Interior (St. Elizabeths).....	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	1	-----	-----	-----	-----	-----	-----	3
Soldiers' homes.....	106	45	33	8	30	35	4	2	2	1	4	20	1	1	1	1	-----	1	41	-----	-----	-----	-----	-----	2	388
State.....	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	8
Civil.....	2	-----	-----	-----	3	-----	-----	1	-----	-----	-----	1	-----	2	-----	-----	2	-----	6	-----	1	-----	-----	-----	-----	46
Total.....	180	129	92	540	138	150	213	55	43	315	39	56	66	121	138	19	15	33	478	55	156	63	124	14	12	6,004
ALL PATIENTS																										
U. S. veterans.....	423	189	239	1,333	575	192	695	298	106	900	111	114	210	233	170	84	44	40	847	176	514	133	309	25	138	16,927
U. S. Marine.....	26	11	20	-----	14	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	1	-----	-----	-----	-----	-----	-----	227
U. S. Army.....	20	16	11	36	9	11	28	15	21	10	5	10	21	14	253	20	8	38	329	22	6	6	3	3	9	1,792
U. S. Navy.....	13	29	3	162	15	8	5	-----	1	1	-----	-----	3	-----	-----	-----	-----	-----	117	2	-----	-----	1	1	5	1,196
U. S. Interior (St. Elizabeths).....	8	1	8	2	4	5	2	2	1	1	-----	-----	-----	-----	5	-----	1	-----	4	-----	1	2	-----	-----	17	374
Soldiers' homes.....	330	284	114	133	77	124	46	17	15	31	9	43	25	6	3	2	1	2	105	2	1	2	-----	1	7	1,868
State.....	3	2	7	254	5	210	1	1	2	37	1	2	-----	1	-----	-----	-----	-----	20	4	2	-----	1	1	11	1,998
Civil.....	4	3	1	5	115	-----	2	1	-----	1	-----	1	-----	2	-----	1	3	1	60	-----	2	2	-----	-----	6	583
Total.....	827	535	403	1,926	814	550	779	329	146	981	126	170	260	266	431	107	57	81	1,483	206	526	145	307	31	193	24,965

NOTE:—Includes United States veterans only.

TABLE NO. 23.—Patients of the United States Veterans' Bureau under treatment in hospitals in their home State, by groups of hospitals and type of patient, at the close of each fiscal year 1923–1927

Fiscal year and groups of hospitals	Type of patient									
	Pulmonary tuberculosis		Psychotic		Nervous and endocrines		General		Total	
	Hospitalized in home State	Hospitalized in other States	Hospitalized in home State	Hospitalized in other States	Hospitalized in home State	Hospitalized in other States	Hospitalized in home State	Hospitalized in other States	Hospitalized in home State	Hospitalized in other States
1923										
United States veterans.....	1,725	3,044	1,219	1,446	362	416	1,308	925	4,614	5,831
Other Government.....	1,105	1,480	482	1,152	164	252	1,032	722	2,783	3,606
State and civil.....	1,881	342	3,130	248	260	63	756	97	6,027	750
Total.....	4,711	4,866	4,831	2,846	786	731	3,096	1,744	13,424	10,187
1924										
United States veterans.....	1,801	2,901	1,920	2,061	398	485	1,131	1,005	5,250	6,452
Other government.....	817	1,095	483	1,125	163	166	1,031	745	2,494	3,132
State and civil.....	1,203	265	2,390	104	148	17	238	37	3,979	423
Total.....	3,821	4,261	4,793	3,291	709	668	2,400	1,787	11,723	10,007
1925										
United States veterans.....	2,491	3,495	3,126	2,948	597	691	1,552	1,247	7,766	8,381
Other government.....	882	1,192	530	1,143	223	224	1,549	864	3,184	3,423
State and civil.....	1,023	231	2,164	97	142	20	150	29	3,479	377
Total.....	4,396	4,918	5,820	4,188	962	935	3,251	2,140	14,429	12,181
1926										
United States veterans.....	2,315	2,838	3,429	3,225	642	678	1,660	1,256	8,046	7,997
Other Government.....	611	779	432	1,105	215	207	1,489	885	2,747	2,976
State and civil.....	623	142	2,043	93	140	11	85	12	2,891	258
Total.....	3,549	3,759	5,904	4,423	997	896	3,234	2,153	13,684	11,231
1927										
United States veterans.....	2,344	2,504	4,106	3,907	402	422	1,910	1,332	8,762	8,165
Other Government.....	556	683	360	717	270	163	1,737	971	2,923	2,534
State and civil.....	344	64	1,970	75	68	6	50	4	2,432	149
Total.....	3,244	3,251	6,436	4,699	740	591	3,697	2,307	14,117	10,848

NOTE.—Includes United States veterans only.

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123

124

CENTRAL																									
Ohio.....	1					4	1	60		1		24	6	2	7	1	4		3	1	3			1	
Indiana.....							2	43					3				7	5	2			2	1		
Kentucky.....	1				1	1		9		5	1	17			2		6	1	5	4	7				
Illinois.....	1				1	2	1	8					2			1	3	3	1	2			3		
Michigan.....	1				1	6		6		1			1	2		1	4					1			
Wisconsin.....	1							4		1	1						2				2		1		
Missouri.....						1	1	1							1		2		1			3	3		
Iowa.....						2	1	2							1						1	4	9		
Minnesota.....	1					1	1	3						1											
South Dakota.....							1									1						2	1		
Kansas.....																1		1		1					
WESTERN																									
Montana.....				1				2																	
Colorado.....	4		1			4	15	5	15		3	2	1	3	9	2	3	1	4	5	7	3	34	40	25
New Mexico.....	5	1				3	9	5	17		1	2	2	2	1	1	2	1	3	7	4	3	7	10	35
Wyoming.....	1			1	1		2		8				2	1				1				1	3	8	26
California.....	14	2	2	1	1	3	29	3	21	1	2	2	2	2	1	5	3	3	6	1	6	4	6	3	30
Arizona.....	11	2	1	2	1	4	26	6	30	1	3	2	5	8	8	6	3	1	10	3	11	5	8	12	15
Washington.....	2	1					3	3								2	1		1			1		1	
Idaho.....	1								1				1					1							1
Total.....	1,043	124	97	128	51	318	2,652	657	1,787	38	353	364	480	260	559	290	434	242	485	470	434	274	417	421	919

TABLE NO. 24.—Patients of the United States Veterans' Bureau under treatment in all hospitals, exclusive of United States possessions, by State location of hospital and patient's State of residence June 30, 1927—Continued

Area and State in which patient is hospitalized	State of residence claimed by patient																							Unknown and miscellaneous	Total	
	Central area											Western area														
	Ohio	Indiana	Kentucky	Illinois	Michigan	Wisconsin	Missouri	Iowa	Nebraska	Minnesota	North Dakota	South Dakota	Kansas	Montana	Colorado	New Mexico	Utah	Wyoming	California	Arizona	Washington	Idaho	Oregon			Nevada
EASTERN																										
Massachusetts.....			1		1		1	1																	8	1,344
Maine.....																										46
New Hampshire.....																										23
Rhode Island.....																										35
Vermont.....																										4
Connecticut.....																										69
New York.....	6		2	6	4		3	2		4					3				2		1		1		36	8,011
New Jersey.....																									1	208
Pennsylvania.....	15	1		1	4																				1	884
Delaware.....																										
District of Columbia.....	12	3	10	5	11	6	3	5	4	2		1	1	1	5		1	1	7		4	2			21	1,049
Maryland.....	3		1	6	2		1	1		4			2		1										12	899
Virginia.....	1					1				1																243
West Virginia.....	1																									44
SOUTHERN																										
Georgia.....	3			4	1		1	1											1		1		1		4	661
Florida.....	1						1																			203
North Carolina.....	20		9		5	1	4						2						1						1	555
Tennessee.....	7	2	18	3	1	1	5		1						1				1						1	595
Louisiana.....	1	1	1	1																					3	335
Alabama.....	3	1	7	1			8	1				1	3		2											561
Mississippi.....														1					2		1				3	324
Arkansas.....	8	4	4	15	1	1	42	2	4	2			14		2	5	1		4	2	2				5	794
Oklahoma.....		1					1	1					5		1			1	2							329
Texas.....	1	9	2	8	1	3	14	2	1	1		1	1			10		1	3	10			1	2	549	

CENTRAL																										
Ohio.....	448	77	131	3	28	8	11	11	2	4	1	19	2	2	2	2	4	1	2	1	3	824				
Indiana.....	144	219	63	60	9	8	30	11	11	21	4	1	19	2	2	2	4	1	2	3	700					
Kentucky.....	23	62	83	25	1	43	1	1	1	1	1	1	1	1	1	1	1	1	1	1	317					
Illinois.....	47	91	24	1,527	74	43	9	15	3	4	2	5	1	1	1	1	2	3	3	1	2	1,886				
Michigan.....	17	5	1	19	538	24	17	1	6	1	1	1	1	2	2	3	1	1	1	4	664					
Wisconsin.....	2	4	1	59	84	414	2	13	8	1	1	1	1	1	1	1	1	1	1	1	604					
Missouri.....	2	5	10	66	1	1	244	33	26	1	17	48	2	1	2	1	1	1	1	4	473					
Iowa.....	3	1	4	5	1	4	193	162	42	20	3	4	67	1	2	2	1	1	1	11	548					
Minnesota.....			1	3	1	13	3	10	4	850	80	67	6	1	1	1	1	3	1	3	1,052					
North Dakota.....								2	2	1	4	44	1	1	1	1	2	1	1	1	59					
South Dakota.....				1				1	1	1	4	4	4	1	1	1	2	1	1	1	20					
Kansas.....		1				8	1																			
WESTERN																										
Montana.....						2	3		4	13	2		146			1	4	1	1	1	181					
Colorado.....	14	7	8	25	7	7	70	31	20	9	5	10	54	13	1	6	36	10	3	2	4	835				
New Mexico.....	9	5	6	22	9	2	15	8	1	6	1	1	3	1	8	39	1	10	5	1	279					
Utah.....																	3				3					
Wyoming.....	5	4	1	5	2	3	18	3	17	6	9	13	12	62	85	26	24	33	5	2	415					
California.....	8	12	4	19	7	7	17	6	5	15	2	2	10	9	6	7	7	3	1,310	34	15	1,732				
Arizona.....	24	19	9	28	19	7	15	10	1	9	3	4	8	3	10	3	1	1	81	149	10	606				
Washington.....	1	1	2	7	2	1	3	3		3	1	1	8	2	2	2	1	1	20		462	763				
Idaho.....									1	2				1	1	1	12	1	1	4	130					
Oregon.....						1								1	1	1	1	3		9	113					
Total.....	827	535	403	1,925	814	550	779	329	146	961	126	170	260	256	431	107	57	81	1,483	206	526	145	307	31	193	24,965

NOTE.—Includes United States veterans only.

TABLE NO. 25.—Discharges of United States Veterans' Bureau patients by beneficiary, groups of hospitals, and type of patient, fiscal year 1927

Class of beneficiary	United States veterans				Other Government				State and civil				All hospitals			
	Tuber- culosis	Neuro- psychi- atric	General	All dis- eases	Tuber- culosis	Neuro- psychi- atric	General	All dis- eases	Tuber- culosis	Neuro- psychi- atric	General	All dis- eases	Tuber- culosis	Neuro- psychi- atric	General	All dis- eases
<i>22,163,211</i> United States veterans of the World War.....	11,827	6,569	19,578	37,974	4,143	3,555	19,211	26,909	1,181	1,023	1,118	3,322	<i>17,573</i> 17,151	11,147	39,907	68,205
Compensable disability.....	9,341	4,356	8,683	22,380	3,477	2,228	7,725	13,430	1,100	1,001	824	2,925	13,918	7,585	17,232	38,735
Noncompensable disability.....	2,486	2,213	10,895	15,594	666	1,327	11,486	13,479	81	22	294	397	3,233	3,562	22,675	29,470
United States veterans of wars, occu- pations, and rebellions previous to World War.....	298	196	1,150	1,644	135	177	1,896	2,208	9	4	41	54	442	377	3,087	3,906
Boré rebellion.....	2	1	5	8	1	4	5	10	1	1	1	3	3	1	9	13
Cuban pacification.....	5	2	1	8	1	10	12	23	1	1	1	3	6	12	2	20
Nicaraguan campaign.....	1	1	1	3	1	1	2	4	1	1	1	3	1	1	1	2
Philippine insurrection.....	23	10	91	124	7	11	167	185	7	19	26	37	37	21	277	335
Fugitive expedition into Mexico.....	10	3	10	23	2	15	17	34	2	4	22	28	10	5	25	40
Spanish-American War.....	248	174	972	1,394	123	147	1,543	1,813	2	4	22	28	373	325	2,537	3,235
Vera Cruz expedition.....	6	3	9	18	2	3	5	10	1	1	1	3	8	6	14	24
Civil War.....	2	5	51	58	1	6	133	139	1	1	1	3	2	12	184	198
Other wars, expeditions, and occupations.....	2	17	19	38	1	29	30	60	1	1	1	3	2	1	46	49
Allied veterans.....	80	39	113	232	26	33	186	245	8	8	18	34	114	80	317	511
British.....	9	6	3	18	3	8	18	29	1	3	1	5	13	17	22	52
Canadian.....	71	31	108	210	22	25	166	213	7	5	14	26	100	61	288	449
All others.....	1	2	2	5	1	2	3	6	1	1	3	5	1	2	7	10
Miscellaneous.....	56	32	243	331	9	9	21	39	17	3	4	24	82	44	268	394
Employees, U. S. Veterans' Bureau.....	9	5	156	170	1	1	1	3	1	1	1	3	9	5	157	171
Employees' Compensation Commission.....	12	3	13	28	1	1	1	3	1	1	1	3	12	3	13	28
Emergency.....	32	20	39	91	9	5	20	34	9	1	4	14	50	26	63	139
All other beneficiaries.....	3	4	35	42	4	4	4	12	8	2	1	10	11	10	35	56
Grand total.....	12,261	6,836	21,084	40,181	4,313	3,774	21,314	29,401	1,215	1,038	1,181	3,434	17,789	11,648	43,579	73,016

TABLE NO. 26.—Discharges of United States Veterans' Bureau patients, by class of disease and disposition or condition on disposition, showing average days hospitalized, fiscal year 1927

Class of disease	All diseases and conditions																
	Disposition or condition on disposition																
	Total		Discharged, maximum benefit from hospitalization						Out-patient, office, or home treatment						Transferred for further treatment		
			Recovered or cured			Improved			Improved			Unimproved					
	Cases	Average days	Cases	Average days	Per cent	Cases	Average days	Per cent	Cases	Average days	Per cent	Cases	Average days	Per cent	Cases	Average days	Per cent
Abnormalities and congenital malformations.	102	55.9	4	36.0	3.92	57	68.0	55.88							1	174.0	0.98
Blood and blood-forming organs.	144	104.2				68	114.8	47.22							9	92.0	6.25
Bones and cartilages.	1,516	71.2	160	61.9	10.55	925	77.4	61.02	4	175.8	0.26				39	142.5	2.57
Circulatory system.	3,042	60.7	64	39.6	2.10	1,639	68.3	53.88	6	147.2	.20				80	126.8	2.63
Communicable and infectious diseases.	662	59.7	77	31.1	11.63	423	60.7	63.90				1	266.0	0.15	23	176.6	3.47
Constitutional defects.	1,403	90.9	7	143.1	.50	466	114.8	33.21	3	102.7	.21				74	159.9	5.27
Dental.	651	28.3	25	31.8	3.84	330	36.6	50.69	1	18.0	.15				8	29.4	1.23
Digestive system.	7,237	44.3	869	30.2	12.01	4,701	50.5	64.96	6	15.7	.08	2	8.5	.03	112	74.2	1.55
Ear, nose, and throat.	7,368	22.1	1,363	15.1	18.50	4,720	24.9	64.06	3	85.7	.04	1	17.0	.01	38	61.6	.52
Endocrines.	1,017	73.6	13	91.0	1.28	649	86.3	63.82	2	43.0	.20	1	22.0	.10	45	102.9	4.42
Eye and annexa.	823	41.1	55	27.7	6.68	457	50.0	55.53	2	90.0	.24				7	41.7	.85
Functional nervous diseases.	2,988	66.0	19	88.5	.64	1,625	80.9	54.38	6	225.0	.20				85	170.2	2.84
Genito-urinary system.	2,326	53.4	137	39.8	5.89	1,458	58.4	62.68	5	45.4	.21				48	129.8	2.06
Hernia.	1,604	40.4	484	37.1	30.17	890	46.2	55.49							6	39.2	.37
Joints and bursae.	3,218	68.9	52	54.1	1.62	2,309	75.2	71.75	4	203.8	.12				80	117.1	2.49
Lymphatic system.	171	48.3	17	53.4	9.94	95	47.9	55.56	1	3.0	.58				7	92.3	4.09
Muscles, fasciae, tendons, and tendon sheaths.	469	38.1	38	21.0	8.10	329	42.7	70.15							7	73.7	1.49
Nervous system.	1,656	93.9	32	62.5	1.93	847	102.9	51.15				4	639.5	.24	87	133.7	5.25
Obstetric and gynecological conditions.	22	53.2	4	21.3	18.18	13	33.2	59.09							1	171.0	4.55
Parasitic diseases.	747	40.6	21	42.1	2.81	531	45.7	71.08	2	180.0	.27				19	63.7	2.54
Poisonings and intoxications.	216	38.2	27	11.0	12.50	127	47.5	58.80							5	19.6	2.31
Psychiatric diseases.	4,269	462.4	47	264.9	1.10	1,123	351.4	26.31	6	188.8	.14	4	238.8	.09	1,506	741.8	35.28
Respiratory system.	3,391	54.0	118	38.3	3.48	1,887	61.5	55.65	8	105.3	.24	2	177.0	.06	131	94.0	3.86
Skin and its appendages.	1,065	46.1	108	36.4	10.14	658	54.7	61.78	3	45.0	.28				15	94.5	1.41
Tuberculosis, pulmonary.	15,552	169.3				2,137	317.9	13.74	251	388.5	1.61	181	301.4	1.16	1,730	205.1	11.12
Tuberculosis, other than pulmonary.	633	144.5				237	152.7	37.44	8	198.8	1.26	2	59.0	.19	113	142.8	17.85
Tumors.	1,068	50.7	116	25.6	10.86	453	45.7	42.42	2	9.5	.19	2	59.0	.19	64	74.9	5.99
Veneral diseases.	2,233	70.4	34	101.4	1.52	1,347	80.6	60.32	7	20.0	.31	1	22.0	.04	114	83.4	5.11
Miscellaneous.	2,945	40.2	270	38.4	9.17	1,252	56.2	42.51	11	30.4	.37				63	84.9	2.14
Under observation, disease not found.	2,650	24.5				13	87.3	.49	1	23.0	.04				87	52.2	3.28
Special examination only.	921	4.5													1	17.0	.11
Board and lodging.	2	2.5															
Total.	72,111	100.5	4,161	32.9	5.77	31,766	86.6	44.05	342	312.9	.47	199	295.9	.28	4,605	351.6	6.39

TABLE NO. 26.—Discharges of United States Veterans' Bureau patients, by class of disease and disposition or condition on disposition, showing average days hospitalized, fiscal year 1927—Continued

Class of disease	All diseases and conditions														
	Disposition or condition on disposition														
	Unimproved			Died			Discharged for personal reasons								
							Against advice of medical officer in charge			Left without permission			Disciplinary		
	Cases	Average days	Per cent	Cases	Average days	Per cent	Cases	Average days	Per cent	Cases	Average days	Per cent	Cases	Average days	Per cent
Abnormalities and congenital malformations.....	7	103.7	6.86	2	62.5	1.96	4	19.5	3.92	7	38.9	6.86	20	15.5	19.61
Blood and blood-forming organs.....	9	75.7	6.25	28	129.6	19.44	12	17.2	8.33	11	153.3	7.64	7	23.1	4.86
Bones and cartilages.....	59	62.2	3.89	28	80.6	1.85	62	68.5	4.09	105	57.9	6.93	17	70.7	1.12
Circulatory system.....	214	64.3	7.03	354	66.0	11.64	135	46.0	4.44	164	47.9	5.39	20	72.5	1.66
Communicable and infectious diseases.....	18	100.3	2.72	29	75.2	4.38	22	39.5	3.32	48	37.9	7.25	2	56.5	3.0
Constitutional defects.....	250	114.6	17.82	10	437.6	.71	71	38.4	5.06	118	119.2	8.41	12	19.8	8.6
Dental.....	16	23.4	2.46	1	71.0	.15	55	14.7	8.45	65	13.7	9.98	5	40.4	7.7
Digestive system.....	151	48.3	2.09	115	41.5	1.59	262	29.2	3.62	333	38.2	4.60	33	82.2	4.6
Ear, nose, and throat.....	91	24.1	1.24	17	64.8	.23	382	13.9	5.18	280	18.3	3.80	21	48.4	2.9
Endocrines.....	34	66.9	3.34	24	86.5	2.36	53	55.2	5.21	61	51.9	6.00	2	89.5	2.0
Eye and annexa.....	74	56.2	8.99	33	16.4	4.01	38	25.4	4.62	3	135.7	3.6	154	18.9	18.71
Functional nervous diseases.....	229	63.2	7.66	4	298.0	.13	56	28.2	1.87	118	72.2	3.95	10	42.7	3.3
Genitourinary system.....	76	39.9	3.27	148	54.5	6.36	119	35.0	5.12	131	50.1	5.63	13	83.3	5.6
Hernia.....	22	59.1	1.37	9	27.1	.66	43	23.4	2.68	52	23.4	3.24	6	56.3	3.7
Joints and bursæ.....	168	76.6	5.22	15	113.3	.47	100	46.7	3.11	175	41.7	5.44	33	72.2	1.03
Lymphatic system.....	6	46.0	3.51	11	93.1	6.43	4	18.8	2.34	20	30.5	11.70	2	59.0	1.17
Muscles, fasciæ, tendons, and tendon sheaths.....	13	49.2	2.77	1	61.0	.21	11	20.1	2.35	17	21.7	3.62	5	32.6	1.07
Nervous system.....	179	119.5	10.81	61	163.9	3.68	89	54.8	5.37	109	71.6	6.58	8	290.9	.48
Obstetric and gynecological conditions.....	1	10.0	4.55	1	74.0	.13	29	31.1	3.88	25	32.0	3.35	4	40.8	.54
Parasitic diseases.....	7	41.4	.94	1	2.4	.21	15	30.3	6.94	21	47.5	9.72	5	43.4	2.31
Poisonings and intoxications.....	5	11.6	2.31	5	2.4	.21	303	210.8	7.10	499	281.2	11.69	4	119.3	.09
Psychiatric diseases.....	229	301.3	5.36	309	541.7	7.24	115	55.5	3.39	181	56.1	5.34	49	88.2	1.45
Respiratory system.....	208	61.1	6.13	148	32.1	4.36							544	20.0	16.04

Skin and its appendages.....	42	53.3	3.94	6	24.7	.56	32	20.0	3.00	61	34.3	5.73	7	40.9	.66	133	16.7	12.49
Tuberculosis, pulmonary.....	356	291.9	2.29	1,862	159.1	11.97	2,873	203.0	18.47	2,415	140.9	15.53	275	208.2	1.77	3,472	18.8	22.33
Tuberculosis, other than pulmonary.....	38	107.5	6.00	63	166.8	9.95	73	230.9	11.53	39	117.6	6.16	6	83.8	.95	56	18.1	8.85
Tumors.....	73	54.2	6.84	190	84.4	17.79	40	37.7	3.75	46	40.0	4.31	3	77.3	.28	79	23.0	7.40
Venereal diseases.....	91	92.8	4.08	32	64.3	1.43	176	46.3	7.88	221	47.7	9.90	31	94.0	1.39	179	18.6	8.02
Miscellaneous.....	99	85.1	3.36	50	45.1	1.70	271	16.0	9.20	463	14.6	15.72	26	67.6	.88	440	19.5	14.94
Under observation, disease not found.....	7	45.3	.26				50	46.0	1.89	166	33.3	4.00	10	55.9	.38	2,376	22.1	89.66
Special examination only.....							5	9.8	.54	14	9.0	1.52				901	4.4	97.63
Board and lodging.....																2	2.5	100.00
Total.....	2,772	120.1	3.84	3,523	160.6	4.89	5,495	134.1	7.62	5,943	102.5	8.24	612	135.7	.85	12,693	19.6	17.60

NOTE.—Discharges of 511 allied veterans and 394 miscellaneous beneficiaries are excluded from this tabulation.

TABLE NO. 27.—Movement of patient population, showing type of admission and result of treatment, fiscal year 1927

United States veterans' hospitals (number and location)	Admissions		Disposition or condition on disposition															Surgical operations	Patients remaining under treatment June 30, 1927			
	First admission	Readmission	Recovered or cured	Improved	Unimproved	Died	Against advice of medical officer in charge	Left without permission	Transferred for further treatment	Discharged after observation, special examination, adjunct or emergency treatment	Total											
											Cases	Average days	Cases	Average days	Cases	Average days	Cases			Average days	Cases	Average days
26. Palo Alto, Calif.....	38	186			121	361.4	12	256.4	28	580.8	9	397.1	39	274.2	24	465.8	6	58.5	239	371.8	10	563
27. Alexandria, La.....	224	568	5	17.4	156	167.1	21	157.4	25	139.1	99	110.1	213	106.5	26	145.5	279	17.9	824	91.4	235	174
32. Washington, D. C.....	222	895	4	43.5	73	75.5	18	57.5	6	32.0	3	101.0	29	57.4	93	80.6	876	43.8	1,102	49.6	157	162
37. Waukesha, Wis.....	412	377	25	34.3	467	96.9	31	94.2	24	77.5	24	46.4	59	72.4	13	100.8	126	24.6	799	78.9	225	158
41. West Haven, Conn.....	64	132	1	23.0	58	607.9	4	512.8	48	313.3	71	255.4	23	224.9	136	460.9	53	18.9	394	353.7	28	
42. Perry Point, Md.....	138	401	2	936.5	270	234.0	39	201.3	28	558.6	28	102.9	37	160.9	26	390.6	8	29.5	438	246.0	29	899
44. West Roxbury, Mass.....	32	92			69	341.2	15	653.6	4	702.8	15	411.3	14	158.6	13	454.4	9	16.2	129	384.0	165	244
49. Atlanta, Ga.....	161	272	5	360.0	295	78.8	18	29.1	12	84.6	16	49.6	15	26.5	26	102.9	53	14.0	440	67.2	124	64
49. Philadelphia, Pa.....	58	79			40	368.7	11	151.1	16	305.5	21	236.9	21	191.3	9	313.1	2	73.0	120	277.1	4	416
50. Whipple, Ariz.....	224	568	6	29.2	224	208.1	52	295.3	70	160.6	103	192.6	128	140.6	74	188.5	112	30.8	769	167.2	246	408
51. Tucson, Ariz.....	71	280	1	14.0	94	287.0	36	312.8	40	205.1	46	188.0	56	194.5	45	198.6	28	18.3	346	218.1	13	199
52. Boise, Idaho.....	456	397	40	29.9	491	65.2	24	123.4	16	132.4	36	117.8	31	115.7	12	46.6	202	12.9	852	57.8	384	130
53. Dwight, Ill.....	345	309	45	24.7	442	59.4	12	69.4	3	21.7	17	28.1	34	25.5	34	59.7	45	18.8	632	51.4	104	95
55. Fort Bayard, N. Mex.....	122	426	5	7.2	71	421.0	53	321.8	47	170.3	187	229.1	88	163.5	36	387.5	124	22.8	611	211.1	54	278
57. Knoxville, Iowa.....	58	139			40	369.6	16	206.7	10	725.2	9	400.4	10	432.0	11	384.4	5	17.2	101	373.2	2	547
59. Tacoma, Wash.....	832	847	67	34.6	773	66.5	50	71.2	55	73.9	151	38.0	70	30.5	63	35.6	423	13.3	1,652	46.7	661	210
60. Oteen, N. C.....	566	1,099	2	132.0	269	322.0	76	273.5	144	180.0	220	196.4	319	137.6	97	202.7	662	17.3	1,799	141.1	151	555
62. Augusta, Ga.....	73	174	5	43.2	123	258.4	1	689.0	17	541.7	35	269.6	32	319.2	34	760.4	3	21.0	250	349.9	15	587
63. Lake City, Fla.....	777	1,063	64	31.7	976	45.5	53	61.3	18	58.9	82	97.6	30	32.4	57	27.3	519	8.6	1,799	32.3	725	200
65. St. Paul, Minn.....	754	1,218	79	14.6	1,065	55.4	49	64.6	39	83.9	14	83.3	54	28.5	232	105.2	694	10.4	2,246	45.4	602	
67. Kansas City, Mo.....	791	782	230	23.7	698	43.2	82	45.3	36	35.0	30	41.9	55	30.3	51	66.6	328	17.5	1,510	34.9	721	148
68. Minneapolis, Minn.....	124	222			149	310.2	3	96.7	44	214.2	56	338.2	73	201.1	88	291.4	32	29.3	444	260.8	92	187
72. Fort Harrison, Mont.....	328	367	1	44.0	298	117.0	63	93.4	8	42.9	76	92.0	109	82.0	32	167.4	101	21.7	688	93.9	247	179
74. Gulfport, Miss.....	276	733	2	61.0	504	89.0	34	111.1	11	33.3	20	38.6	69	80.9	14	204.8	264	24.5	908	71.1	97	308
Edw. Hines, jr., Maywood, Ill.....	1,265	1,590	86	63.7	1,381	105.8	179	85.9	209	141.7	100	92.4	281	68.0	104	151.7	447	25.3	2,887	89.7	1,176	739
77. Portland, Oreg.....	466	358	25	30.0	557	55.8	21	62.4	23	27.2	1	4.0	44	17.0	31	46.0	111	20.1	823	46.7	539	113
78. North Little Rock, Ark.....	112	242	2	98.5	127	267.4	5	573.4	25	317.8	28	209.3	53	268.2	41	316.5	18	28.4	299	262.6	12	634
79. Outwood, Ky.....	268	653			14	348.9	7	362.3	59	144.6	200	214.6	242	149.2	22	208.4	388	18.5	932	114.5	41	289
80. Fort Lyon, Colo.....	218	262	2	34.5	127	166.5	14	380.8	52	157.1	150	217.8	65	149.4	20	105.2	52	39.0	482	168.5	22	236

81. Bronx, N. Y.	166	388	3	685.0	203	197.9	32	117.4	19	316.6	95	78.8	28	354.5	22	307.9	13	15.8	415	184.1	33	901
84. Algiers, La.	622	779	11	37.9	667	82.9	40	50.3	45	65.4	110	33.2	167	57.6	334	103.2	198	22.3	1,572	71.8	291	132
85. Walla Walla, Wash.	107	148	2	19.0	50	276.4	8	172.6	51	205.9	77	291.3	34	151.8	7	331.4	8	43.4	237	236.3	52	185
86. Sheridan, Wyo.	51	95	4	132.5	53	295.8	9	247.0	10	422.8	17	355.7	25	232.2	12	366.0	2	103.0	132	296.3	17	415
88. Memphis, Tenn.	1,311	1,252	153	34.3	1,225	42.4	46	38.6	40	42.4	472	15.9	206	20.1	117	28.8	272	16.7	2,531	31.7	2,163	257
89. Rutland, Mass.	230	453			26	291.9	1	96.0	89	157.0	208	189.6	100	133.7	15	311.3	115	28.7	554	148.8	12	377
90. Muskogee, Okla.	1,315	1,178	6	39.0	1,107	61.7	88	61.4	56	52.3	139	25.7	269	23.0	98	63.8	687	18.7	2,450	43.2	491	301
91. Tuskegee, Ala.	422	520	4	57.0	471	151.7	31	108.9	111	152.9	49	60.1	161	109.8	3	512.3	76	32.8	906	128.8	81	561
92. Jefferson Barracks, Mo.	757	780	20	41.8	753	70.7	77	62.2	62	61.6	72	46.3	186	32.3	105	71.8	252	27.1	1,527	56.6	512	237
93. Legion, Tex.	148	318			100	347.6	15	361.3	49	230.0	114	293.9	46	128.8	16	257.8	135	19.2	498	201.9	27	296
94. American Lake, Wash.	22	103			36	256.9	3	405.7	8	551.3	4	46.0	25	272.6	16	358.1	3	69.7	95	292.8	8	367
95. Northampton, Mass.	7	57	2	122.5	13	542.0	2	31.5	3	398.7			2	875.0	11	365.9	1	10.0	34	421.5	1	440
96. Sunmount, N. Y.	143	243			145	311.9	25	385.5	53	141.1	69	165.2	43	131.7	38	151.2	34	37.5	407	212.4	62	324
97. Chillicothe, Ohio.	106	216	9	22.3	142	179.2	61	143.8	27	317.9	8	91.8	22	217.0	10	392.4	35	22.3	314	169.5	89	446
98. Castle Point, N. Y.	282	422			117	435.9	41	228.0	105	176.5	109	183.7	175	134.4	25	209.6	101	35.1	673	195.0	25	402
99. Excelsior Springs, Mo.	385	239	70	27.4	377	53.8	34	84.4	5	98.8	29	26.4	26	28.6	15	76.2	48	18.8	604	48.2	250	88
100. Camp Custer, Mich.	28	70			34	282.4	7	201.0	14	524.4	9	210.0	44	317.1	6	439.5	3	95.0	117	317.2	12	524
101. St. Cloud, Minn.	7	31			13	452.0	1	23.0	4	469.5	1	282.0	6	248.2	11	450.1	2	35.0	38	383.4		321
102. Livermore, Calif.	125	264			39	353.3	12	284.3	74	98.9	74	264.5	50	148.2	29	279.9	110	20.0	388	159.3	41	223
103. Aspinwall, Pa.	152	217			66	176.4	18	196.4	49	113.5	81	107.8	73	133.6	29	238.4	44	24.0	360	131.1	9	162
104. San Fernando, Calif.	88	168			66	207.1	6	255.0	37	130.6	86	159.1	20	137.8	27	150.1	10	32.7	252	162.1	49	174
105. North Chicago, Ill.	34	282			31	157.4	2	30.0	15	179.3	8	99.1	15	104.7	3	210.3	3	22.3	77	138.8	2	535
106. Fort Snelling, Minn.	197	632	7	15.0	179	32.3	6	35.2	21	23.0	15	21.8	27	32.8	11	270.0	61	20.4	327	28.6	60	503
U. S. Veterans' Bureau Diagnostic Center, Cincinnati, Ohio.	80	537			2	10.0							1	6.0	1	18.0	611	13.7	615	13.7	1	19
Total	16,266	24,123	995	36.1	15,907	110.7	1,564	145.4	2,074	170.4	3,702	139.8	4,167	108.8	2,425	176.6	8,784	21.0	39,618	100.0	11,169	16,927
U. S. Marine hospitals.	1,272	1,060	473	28.6	1,102	35.2	90	33.0	77	38.8	54	20.2	95	25.3	73	53.5	335	6.7	2,299	29.5	1,220	227
U. S. Army hospitals.	5,381	5,216	1,640	33.0	4,550	68.5	624	70.3	492	106.1	713	138.7	817	53.4	383	109.6	1,333	19.3	10,552	63.7	4,393	1,732
U. S. naval hospitals.	5,311	5,519	901	25.3	7,551	41.9	430	84.2	323	48.2	430	18.8	615	35.4	368	59.7	1,161	14.1	11,779	39.0	4,268	1,166
U. S. Interior (St. Elizabeths, Washington, D. C.).	8	33	3	242.3	44	755.2	30	802.4	16	939.2	21	994.0	6	670.3	396	1,644.8	5	28.4	502	1,459.3		374
National homes for disabled volunteer soldiers.	1,850	2,106	30	96.1	1,769	100.2	89	238.2	272	169.1	446	179.0	742	194.9	66	420.1	565	19.5	3,985	128.4	1,047	1,868
State hospitals.	152	274	8	274.4	127	571.5	33	375.6	47	949.8	10	107.6	36	269.3	380	802.7	21	25.5	662	670.9		1,968
Civil hospitals.	785	1,611	111	43.3	1,058	139.4	111	214.5	216	162.4	138	190.2	77	164.2	514	269.7	489	15.2	2,714	145.9	463	583
Grand total	32,025	39,942	4,161	32.9	32,108	89.0	2,971	131.9	3,523	160.6	5,495	134.1	6,555	105.6	4,605	351.6	12,693	19.6	72,111	100.5	22,560	24,965

1 Includes 612 discharged for disciplinary reasons.

NOTE.—Discharges of 511 allied veterans and 394 miscellaneous beneficiaries are excluded from this tabulation.

TABLE NO. 28.—Discharges from hospitals of patients of the United States Veterans' Bureau by disposition or condition on disposition and type of patient, fiscal year 1927

Disposition or condition on disposition	Type of patient											
	Pulmonary tuberculosis			Neuropsychiatric			General			Total		
	Cases	Average days	Per cent	Cases	Average days	Per cent	Cases	Average days	Per cent	Cases	Average days	Per cent
Recovered or cured.....				118	155.2	1.02	4,043	29.3	9.40	4,161	32.9	5.77
Arrested.....	740	423.9	4.21							740	423.9	1.03
Apparently arrested.....	192	447.9	1.09							192	447.9	.26
Improved.....	1,216	230.9	6.91	4,710	153.4	40.87	24,908	54.1	57.93	30,834	76.3	42.76
To out-patient office or home treatment, improved.....	252	387.1	1.43	17	169.2	.15	73	90.4	.17	342	312.9	.47
To out-patient office or home treatment, unimproved.....	1181	301.4	1.03	392	392.8	.08	9	88.2	.02	199	295.9	.26
Transferred for further treatment.....	1,812	196.2	10.30	1,801	644.0	15.63	992	100.8	2.31	4,605	351.6	6.39
Unimproved.....	361	288.5	2.05	923	147.2	8.01	1,438	62.5	3.46	2,772	129.1	3.34
Died.....	1,862	156.1	10.59	468	453.5	3.54	1,253	67.4	2.91	3,523	169.6	4.69
Against advice of medical officer in charge.....	2,907	201.3	16.62	573	131.8	5.02	2,010	37.5	4.68	5,495	134.1	7.63
Left without permission.....	2,497	137.6	14.19	916	190.0	7.95	2,530	36.2	5.89	5,943	102.5	8.24
Disciplinary reasons.....	263	204.2	1.61	36	101.3	.31	293	73.8	.68	612	135.7	.85
Discharged after observation, special examination, adjunct or emergency treatment.....												
	5,290	20.3	30.07	2,008	26.1	17.42	5,395	16.4	12.55	12,693	19.6	17.60
Total.....	17,563	152.7	100.00	11,524	219.9	100.00	42,994	47.2	100.00	72,111	160.5	100.00

¹ Includes 100 terminal cases with unfavorable prognosis.

NOTE.—Discharges of 511 allied veterans and 394 miscellaneous beneficiaries are excluded from this tabulation.

TABLE NO. 29.—*Comparison of principal causes of death¹ of United States Veterans' Bureau patients in all hospitals, fiscal years 1924-1927*

Cause of death	Fiscal year of death			
	1924	1925	1926	1927
General diseases:				
Typhoid fever.....	3	1	2	2
Malaria.....	1			
Diphtheria and croup.....	1			
Influenza.....	1		1	1
Dysentery.....	2	4		2
Leprosy.....	1			
Yellow fever.....				1
Erysipelas.....	1		3	3
Other epidemic diseases.....	1			1
Purulent infection and septicemia.....	18	18	24	31
Tetanus.....			1	1
Pellagra.....	2	2	6	5
Mycoses.....			1	2
Beriberi.....	1			1
Tuberculosis of the lungs.....	1,556	1,680	1,850	1,733
Acute miliary tuberculosis.....	79	92	110	131
Tuberculosis meningitis.....	30	17	26	29
Abdominal tuberculosis.....	5	6	14	13
Pott's disease.....	12	11	14	12
White swellings.....		2	1	3
Tuberculosis of other organs.....	14	13	8	6
Disseminated tuberculosis.....	2	19	3	4
Rickets.....		1		
Syphilis.....	9	13	23	21
Gonococcus infection.....				1
Cancer and other malignant tumors of the buccal cavity.....	1	6	7	10
Cancer and other malignant tumors of the stomach, liver.....	11	27	35	46
Cancer and other malignant tumors of the peritoneum, intestines, rectum.....	7	12	14	29
Cancer and other malignant tumors of the female genital organs.....				1
Cancer and other malignant tumors of the skin.....			2	5
Cancer and other malignant tumors of other organs, or of organs not specified.....	36	47	76	96
Other tumors (tumors of the female genital organs excepted).....	7	2	1	1
Acute articular rheumatism.....	1			
Chronic rheumatism and gout.....			3	2
Diabetes.....	10	11	13	16
Exophthalmic goiter.....		2	5	2
Addison's disease.....			2	1
Leukemia.....	16	12	20	22
Anemia.....	15	14	22	17
Other general diseases.....	5	5	6	10
Alcoholism (acute or chronic).....	1	3	10	6
Chronic occupational poisonings.....	2			
Diseases of the nervous system and of the organs of special sense:				
Encephalitis.....	8	15	10	11
Simple meningitis.....	18	10	12	21
Locomotor ataxia.....	2	2	3	1
Other diseases of the spinal cord.....	4	14	14	19
Cerebral hemorrhage, apoplexy.....	16	28	42	56
Softening of the brain.....		1		
Paralysis without specified cause.....	1	2	2	10
General paralysis of the insane.....	108	117	149	121
Other forms of mental alienation.....	24	44	31	18
Epilepsy.....	14	13	7	9
Convulsions (nonpuerperal).....		1	2	
Other diseases of the nervous system.....	8	10	21	20
Diseases of the ear.....	3			
Diseases of the circulatory system:				
Pericarditis.....	6	2	10	6
Acute endocarditis.....	6	14	19	23
Organic diseases of the heart.....	98	158	210	257
Angina pectoris.....	1	1	1	6
Diseases of the arteries, atheroma, aneurysm, etc.....	6	16	26	45
Embolism and thrombosis.....	16	7	18	19
Diseases of the veins (varices, hemorrhoids, phlebitis, etc.).....	1		1	1
Diseases of the lymphatic system (lymphangitis, etc.).....	2	2	1	
Hemorrhage; other diseases of the circulatory system.....	11	6	10	5
Diseases of the respiratory system:				
Diseases of the nasal fossa.....				1
Diseases of the larynx.....	1			2
Diseases of the thyroid body.....				
Acute bronchitis.....	25	2	1	
Chronic bronchitis.....			4	4
Broncho-pneumonia.....	34	37	49	68
Pneumonia.....	30	50	79	87

¹ Causes of death classified according to second revision of International List of Causes of Death.

TABLE NO. 29.—Comparison of principal causes of death of United States Veterans' Bureau patients in all hospitals, fiscal years 1924-1927—Continued

Cause of death	Fiscal year of death			
	1924	1925	1926	1927
Diseases of the respiratory system—Continued.				
Pleurisy.....	5	10	7	12
Pulmonary congestion, pulmonary apoplexy.....	7	10	24	27
Gangrene of the lung.....	3		5	
Asthma.....	2	4	1	5
Pulmonary emphysema.....	1			1
Other diseases of the respiratory system (tuberculosis excepted).....	4	24	21	24
Diseases of the digestive system:				
Diseases of the mouth and annexe.....		1	2	2
Diseases of the pharynx and tonsils.....	1			1
Diseases of the esophagus.....	5	12	5	8
Ulcer of the stomach.....	2	3	6	15
Other diseases of the stomach (cancer excepted).....	1	6	11	14
Diarrhea and enteritis.....		1		
Intestinal parasites.....	5	9	10	6
Appendicitis and typhlitis.....	4	13	10	18
Hernia, intestinal obstruction.....	1	8	8	5
Other diseases of the intestines.....			1	3
Acute yellow atrophy of the liver.....		5	10	17
Cirrhosis of the liver.....	2	1	2	3
Biliary calculi.....	3	5	12	9
Other diseases of the liver.....	1			1
Diseases of the spleen.....	13	21	25	21
Simple peritonitis (nonpuerperal).....	2	3	3	2
Other diseases of the digestive system (cancer and tuberculosis excepted).....				
Nonvenereal diseases of the genitourinary system and annexe:				
Acute nephritis.....	22	22	8	15
Bright's disease.....	49	64	112	129
Other diseases of the kidneys and annexe.....	8	5	10	11
Diseases of the bladder.....			3	3
Calculi of the urinary passages.....	1	1		3
Diseases of the urethra, urinary abscess.....			2	1
Diseases of the prostate.....		1		
The puerperal state: Accidents of pregnancy.				
Diseases of the skin and of the cellular tissue:				
Gangrene.....	1	1	4	5
Furuncle.....		1		
Acute abscess.....	4	2	2	1
Other diseases of the skin and annexe.....	2	1		1
Diseases of bone and of the organs of locomotion:				
Diseases of the bones (tuberculosis excepted).....	5	2	4	5
Diseases of the joints (tuberculosis and rheumatism excepted).....	2		1	1
Senility.....				1
External causes:				
Suicide by poison.....	1	1	3	
Suicide by asphyxia.....			1	1
Suicide by hanging or strangulation.....	1	5	8	8
Suicide by drowning.....	1	1	2	1
Suicide by firearms.....	3	1	3	
Suicide by cutting or piercing instruments.....	1	3	3	2
Suicide by jumping from high places.....	1		1	1
Suicide by crushing.....		2		1
Other suicides.....	3	4	5	2
Acute poisonings.....	4	7	6	6
Burns (conflagration excepted).....			3	
Accidental drowning.....	2	1	1	
Absorption of deleterious gases.....			2	1
Traumatism by firearms.....		1	3	2
Traumatism by cutting or piercing instruments.....				1
Traumatism by fall.....			1	2
Traumatism by crushing (vehicles, railways, landslides, etc.).....			7	4
Starvation.....				1
Effects of heat.....		3		1
Homicide by firearms.....	1	1		1
Homicide by other means.....				
Fractures, cause not specified.....		2	7	5
Other external violence.....	4	5	7	8
Ill-defined diseases:				
Cause of death not specified, or ill-defined.....	30	19	15	24
Total.....	2,592	2,866	3,412	3,523

TABLE NO. 30.—*Discharges from hospitals of female patients of the United States Veterans' Bureau by disposition or condition on disposition and type of patient, fiscal year 1927*

Disposition or condition on disposition	Pulmonary tuberculosis		Neuropsychiatric		General		All female patients	
	Cases	Average days	Cases	Average days	Cases	Average days	Cases	Average days
Recovered or cured.....			1	30.0	37	24.2	38	24.3
Arrested.....	17	506.9					17	506.9
Apparently arrested.....	3	643.3					3	643.3
Improved.....	14	603.9	29	174.6	140	85.7	183	139.4
To out-patient office, improved.....	7	551.7	1	125.0	1	64.0	9	450.1
To out-patient office, unimproved.....	4	193.0	2	426.5			6	270.8
Transferred for further treatment.....	28	248.3	10	472.4	10	97.5	48	263.6
Unimproved.....	7	322.4	10	191.1	8	186.3	25	226.3
Died.....	4	545.8	3	101.7	8	119.5	15	229.6
Discharged against advice of medical officer in charge.....	10	290.7			3		17	198.4
Left without permission.....	4	533.0	4	80.3	26	48.0	30	114.5
Discharged after observation, special examination, adjunct or emergency treatment.....	31	37.6	21	53.2	16	24.9	68	39.4
Total.....	129	319.6	81	178.4	249	73.2	459	161.0

TABLE NO. 31.—*Discharges from hospitals of colored patients of the United States Veterans' Bureau by disposition or condition on disposition and type of patient, fiscal year 1927*

Disposition or condition on disposition	Pulmonary tuberculosis		Neuropsychiatric		General		All colored patients	
	Cases	Average days	Cases	Average days	Cases	Average days	Cases	Average days
Recovered or cured.....			4	70.8	192	46.1	196	46.6
Arrested.....	51	408.9					51	408.9
Apparently arrested.....	32	252.4					32	252.4
Improved.....	87	154.5	194	198.2	1,575	77.6	1,856	83.8
To out-patient office, improved.....	3	470.0	1	1,011.0	3	337.0	7	490.3
To out-patient office, unimproved.....	8	243.1					8	243.1
Transferred for further treatment.....	143	120.5	122	757.7	98	107.4	363	331.1
Unimproved.....	20	272.7	46	153.0	121	55.1	187	102.4
Died.....	332	119.2	46	505.0	159	60.7	537	134.9
Discharged against advice of medical officer in charge.....	119	134.9	16	242.1	201	41.9	336	84.4
Left without permission.....	234	134.4	56	164.2	310	45.8	600	91.4
Disciplinary.....	23	219.2	1	31.0	33	88.7	57	140.3
Discharged after observation, special examination, adjunct or emergency treatment.....	285	28.3	65	39.0	262	26.4	612	28.6
Total.....	1,337	126.1	551	323.2	2,954	64.8	4,842	111.1

COMPENSATION TABLES

TABLE NO. 32.—Summary of regional activities

Regional office	Status of compensation-claims as of June 30, 1927					Adju- dica- tions, fiscal year 1927	Medical treatments and ex- aminations during fiscal year 1927			
	Active cases	Termi- nated	Disal- lowed	Pend- ing cases	Total cases		Indi- vidu- als treated	Treat- ments	Indi- vidu- als exami- ned	Exami- nations
Boston, Mass.	10,966	8,186	17,629	416	37,197	22,122	21,685	81,542	15,894	46,994
Portland, Me.	1,117	718	1,783	44	3,662	2,201	990	3,118	1,818	2,536
Manchester, N. H.	324	501	1,308	34	2,067	1,810	1,850	3,247	1,160	1,850
Providence, R. I.	1,619	1,074	2,556	78	5,333	2,984	4,017	30,012	3,999	5,451
Burlington, Vt.	733	838	908	41	2,520	1,098	525	1,309	645	1,271
New York, N. Y.	15,822	11,049	18,322	475	45,668	34,654	31,886	115,259	26,283	64,625
Buffalo, N. Y.	5,471	3,304	5,990	116	14,885	7,329	5,174	14,711	4,928	12,334
Hartford, Conn.	3,447	1,458	2,704	88	7,702	5,068	6,951	16,889	7,286	9,233
Newark, N. J.	5,262	4,025	7,089	155	16,481	10,057	5,737	43,111	6,304	15,011
Philadelphia, Pa.	11,406	7,809	15,148	237	34,141	16,459	16,266	49,826	16,814	26,874
Pittsburgh, Pa.	6,354	4,688	7,080	268	16,294	8,954	5,885	11,694	7,172	20,162
Washington, D. C.	3,125	3,102	7,047	100	13,477	7,784	10,029	47,715	9,654	27,701
Baltimore, Md.	3,380	1,711	4,205	47	9,343	6,166	3,397	15,374	5,871	14,666
Richmond, Va.	2,811	1,524	4,155	192	8,782	4,811	1,875	2,571	5,057	8,321
Charleston, W. Va.	3,041	1,089	4,393	151	8,674	4,812	537	966	2,955	7,979
Atlanta, Ga.	5,452	3,866	11,736	126	21,212	12,949	605	1,338	6,955	18,989
Jacksonville, Fla.	2,689	489	2,973	62	7,192	3,834	152	160	2,444	5,215
Charlotte, N. C.	4,584	2,163	6,724	157	13,628	7,445	366	575	4,890	10,275
Columbia, S. C.	2,207	1,065	4,326	64	7,662	3,406	268	371	1,961	7,534
Nashville, Tenn.	4,996	3,448	11,194	113	19,751	10,319	85	87	3,615	11,052
New Orleans, La.	2,147	2,071	7,581	96	12,897	7,816	4,034	15,160	3,805	10,565
Birmingham, Ala.	5,018	2,353	10,404	171	17,946	8,567	3,690	7,713	4,498	11,183
Jackson, Miss.	3,463	1,897	7,926	165	13,451	7,199	366	1,242	2,326	10,027
Cincinnati, Ohio.	7,026	6,476	8,335	187	22,024	10,932	3,065	13,426	8,121	24,209
Cleveland, Ohio.	5,802	3,302	5,913	159	15,175	8,316	14,117	23,730	6,811	22,680
Indianapolis, Ind.	6,648	3,776	7,040	200	17,664	11,282	8,867	33,413	7,959	28,942
Louisville, Ky.	7,098	4,540	10,761	165	22,564	12,578	4,616	11,939	7,025	24,829
Chicago, Ill.	13,309	13,724	19,895	477	47,406	21,667	16,457	41,078	20,360	45,817
Detroit, Mich.	6,366	5,908	7,744	98	20,106	11,075	3,290	6,323	10,850	22,718
Milwaukee, Wis.	4,649	6,370	7,290	107	18,416	8,441	2,201	15,770	7,710	16,042
St. Louis, Mo.	4,582	3,705	6,591	81	14,969	7,159	4,936	23,058	6,030	21,275
Kansas City, Mo.	3,538	2,718	6,141	75	12,465	5,435	5,235	9,172	6,397	22,927
Des Moines, Iowa.	3,467	3,216	4,863	91	11,637	4,985	4,321	9,240	3,791	13,306
Omaha, Nebr.	2,192	1,676	3,466	124	7,458	3,042	1,003	1,788	2,629	9,933
Minneapolis, Minn.	9,315	4,050	9,661	191	23,217	14,897	7,631	51,053	14,226	26,014
Helena, Mont.	2,042	645	1,874	37	4,598	3,628	2,796	6,847	2,283	4,698
Sioux Falls, S. Dak.	1,146	633	1,686	45	3,508	1,633	500	848	1,011	4,461
Denver, Colo.	1,583	629	2,238	45	4,495	1,964	610	1,156	1,241	5,148
Albuquerque, N. Mex.	5,513	2,064	4,453	206	12,236	10,918	7,372	18,204	4,558	22,252
Salt Lake City, Utah.	2,614	546	1,817	75	5,050	5,587	3,678	8,317	6,780	8,640
Casper, Wyo.	939	701	1,604	27	3,271	1,702	1,226	3,240	2,225	4,792
San Francisco, Calif.	946	371	1,138	33	2,487	2,512	187	773	1,010	1,783
Los Angeles, Calif.	6,331	3,062	6,616	196	16,208	12,174	6,007	25,469	17,579	53,590
Phoenix, Ariz.	9,168	4,052	6,202	232	19,654	14,829	9,799	34,094	9,287	31,134
Seattle, Wash.	2,815	301	1,306	104	4,526	5,101	4,042	7,224	5,446	5,966
Boise, Idaho.	3,219	2,486	4,840	66	10,611	7,440	2,139	16,843	6,858	15,428
Portland, Oreg.	848	452	1,852	24	3,176	1,577	98	318	1,117	2,028
Dallas, Tex.	1,989	1,504	3,305	91	6,889	3,650	9,058	17,901	9,723	17,471
Little Rock, Ark.	4,287	1,820	6,608	118	12,833	7,913	1,602	12,319	4,686	20,428
Oklahoma City, Okla.	4,741	1,281	6,757	239	13,018	12,560	6,750	8,063	5,009	22,639
Wichita, Kans.	5,517	1,781	6,941	218	14,457	12,218	1,535	2,574	5,908	22,335
San Antonio, Tex.	2,603	1,518	3,311	89	7,421	3,546	2,308	4,455	3,300	16,390
Reno, Nev.	3,506	1,537	4,057	110	9,210	6,518	1,755	8,270	4,864	22,474
Total	221	73	224	9	527	330	1,005	1,544	422	902
Total	1240,989	151,276	327,671	7,358	737,291	432,175	262,420	673,577	338,761	922,364

¹ There are 2,585 foreign cases and 37 cases held in central office not included in this total figure.

TABLE NO. 33.—*Number of compensation death and disability claims received, by fiscal years 1918 to 1927, inclusive*

Fiscal year	Death claims	Disability claims	Total	Fiscal year	Death claims	Disability claims	Total
Total to June 30, 1918.	12, 025	8, 936	20, 961	1924.....	4, 576	35, 901	40, 477
1919.....	127, 762	94, 937	222, 699	1925.....	6, 698	36, 931	43, 624
1920.....	12, 242	179, 546	191, 788	1926.....	8, 516	24, 987	33, 503
1921.....	4, 445	207, 638	212, 083	1927.....	6, 045	29, 772	35, 817
1922.....	4, 343	186, 674	191, 018	Grand total..	190, 869	880, 382	1, 071, 251
1923.....	4, 222	78, 059	79, 281				

TABLE NO. 34.—*Number of compensation death and disability awards,¹ by fiscal years from October, 1917, to June 30, 1927, inclusive*

Fiscal year	Death	Disability	Total	Fiscal year	Death	Disability	Total
Total to June 30, 1918.	1, 664	1, 156	2, 820	1924.....	4, 950	10, 312	15, 262
1919.....	23, 225	27, 128	50, 353	1925.....	8, 351	20, 530	28, 881
1920.....	20, 378	155, 400	175, 778	1926.....	14, 088	12, 662	26, 750
1921.....	7, 392	97, 277	104, 669	1927.....	5, 817	9, 612	15, 429
1922.....	6, 216	70, 979	77, 195	Total to date..	98, 012	434, 455	532, 467
1923.....	5, 981	29, 369	35, 350				

¹ Only one compensation award is counted for each veteran.TABLE NO. 35.—*Gross number of compensation awards on which payments have been terminated, analyzed as to reasons for terminations during fiscal year, 1927*

Reason	Number terminated during fiscal year 1927		
	Death	Disability	Total
Entered vocational training.....		713	713
Payee remarried (female).....	945	93	1, 038
Payee dead.....	1, 561	1, 285	2, 786
Not dependent (parents only).....	1		1
Refuses compensation.....	9	57	66
Erroneous award.....	9	11	20
Failure to cooperate.....	4	4, 827	4, 831
Pending appointment of guardian.....	234	1, 006	1, 240
Can not locate claimant.....	8	1, 284	1, 292
Pending investigation or examination.....	129	1, 582	1, 711
Reenlisted.....		43	43
Disability less than 10 per cent.....		12, 077	12, 077
Disability not result of service.....	9	340	349
Misconduct.....	6	31	37
Child becomes of age.....	8		8
Pending accounting of guardian.....	4	1	5
Miscellaneous.....	14	2, 189	2, 203
Total.....	2, 923	25, 489	28, 412

TABLE No. 36.—*Compensation, active disability awards; comparative analysis of special classification of major disability by extent of disability by fiscal years, 1923-1927*

NEUROPSYCHIATRIC DISEASES

Fiscal year	Temporary partial				Temporary total				Permanent partial				Permanent total ¹				Total			
	Number	Per cent	Monthly payment	Average monthly payment	Number	Per cent	Monthly payment	Average monthly payment	Number	Per cent	Monthly payment	Average monthly payment	Number	Per cent	Monthly payment	Average monthly payment	Number	Per cent	Monthly payment	Average monthly payment
1923.....	15,801	8.63	\$319,650	\$20.23	6,247	3.41	\$521,340	\$83.45	1,055	0.58	\$34,790	\$34.87	5,153	2.81	\$514,750	\$99.89	28,256	15.43	\$1,392,530	\$49.28
1924.....	15,371	8.59	315,375	20.52	5,288	2.95	443,200	83.81	4,545	2.54	133,075	29.28	6,899	3.85	689,805	92.99	32,108	17.93	1,581,455	49.26
1925.....	21,062	9.95	431,606	20.50	7,230	3.42	594,450	82.22	7,157	3.38	206,575	28.86	9,406	4.44	785,075	83.47	44,845	21.19	2,017,705	44.90
1926.....	20,807	9.19	563,485	27.06	5,921	2.61	459,450	77.60	9,631	4.34	322,065	32.76	13,214	5.84	975,325	73.81	49,773	21.98	2,320,345	46.62
1927.....	20,789	8.53	735,119	35.36	4,496	1.84	350,990	78.59	11,506	4.72	423,300	37.66	15,904	6.53	1,195,565	75.17	62,665	21.62	2,714,985	51.55

TUBERCULOSIS

1923.....	18,221	9.95	630,400	34.60	16,544	9.04	1,437,070	86.86	314	0.17	6,000	19.11	6,472	2.54	648,060	100.13	41,651	22.70	2,721,530	65.50
1924.....	16,774	9.37	569,780	33.97	12,278	6.86	1,079,140	87.89	2,685	1.50	30,425	14.93	7,362	4.11	739,695	100.47	39,028	21.84	2,423,040	62.10
1925.....	16,339	7.72	545,375	33.38	14,824	7.00	1,312,175	88.52	5,515	2.61	81,990	14.87	9,161	4.33	934,025	101.96	45,595	21.66	2,873,565	62.69
1926.....	13,702	6.05	504,645	36.82	11,863	5.23	1,066,290	89.96	12,019	5.31	201,960	16.80	10,576	4.67	1,085,650	102.65	48,149	21.26	2,858,435	59.37
1927.....	6,096	2.48	336,400	55.73	3,418	3.86	855,845	90.87	31,040	12.74	1,477,129	47.59	11,254	4.62	1,161,000	103.16	57,795	28.70	3,830,365	66.33

GENERAL MEDICAL AND SURGICAL CONDITIONS

1923.....	85,660	46.79	1,405,075	16.40	6,271	3.42	537,790	85.76	19,189	10.48	524,285	27.32	2,163	1.18	221,690	102.49	113,283	61.87	2,688,830	23.74
1924.....	51,194	28.59	898,570	17.55	4,114	2.47	382,735	86.71	49,746	27.78	1,095,845	22.03	2,481	1.39	261,625	105.45	107,895	60.23	2,638,775	24.47
1925.....	44,241	20.90	850,855	19.23	4,841	2.14	398,060	87.66	68,866	32.54	1,472,610	21.39	2,812	1.57	372,873	112.68	120,990	67.15	3,094,400	25.58
1926.....	38,367	16.94	631,555	24.28	4,365	1.84	371,775	89.26	81,668	36.06	1,974,655	24.18	4,861	1.92	491,975	112.81	125,381	64.68	3,769,960	23.32
1927.....	37,479	15.39	1,076,670	28.70	4,048	1.66	367,820	90.86	86,641	35.57	2,433,590	28.09	5,930	2.06	569,368	113.19	133,185	64.68	4,446,445	33.38

TOTAL

1923.....	119,662	65.37	2,355,125	19.68	29,032	15.87	2,496,200	85.89	29,558	11.23	567,075	27.58	13,788	7.53	1,384,490	100.41	183,080	100.00	6,802,890	37.16
1924.....	83,339	46.55	1,793,725	21.40	21,980	12.28	1,905,075	86.67	59,976	31.82	1,268,345	22.26	16,742	9.35	1,691,125	101.01	179,087	100.00	6,646,270	37.18
1925.....	81,632	38.57	1,827,835	22.39	25,686	12.86	2,304,685	86.06	81,588	38.53	1,761,175	21.60	21,879	10.34	2,091,975	95.62	211,644	100.00	7,966,670	37.78
1926.....	72,376	32.18	1,999,595	27.44	23,390	9.68	1,967,695	86.49	108,518	45.71	2,498,709	24.14	25,151	12.43	2,552,950	90.60	226,484	100.00	8,948,749	39.81
1927.....	64,804	26.40	2,147,180	28.39	17,932	7.36	1,574,655	87.81	129,187	53.03	4,344,030	33.68	32,188	13.21	2,925,930	90.90	243,611	100.00	10,991,795	45.12

¹ Includes double permanent totals.

92,236

TABLE NO. 37.—*Compensation, active disability cases; degree of impairment and extent of disability correlated with classification of major disability, showing number and amount of monthly payments, as of June 30, 1927*

Extent and degree of impairment	Abnormalities and congenital malformations		Blood and blood-forming organs		Bones and cartilages		Circulatory system		Communicable and infectious diseases		Dental		Digestive system	
	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment
Temporary partial:														
10 to 19 per cent.	22	\$300	2	\$20	255	\$3,030	2,428	\$29,230	47	\$525	3	\$30	833	\$9,685
20 to 29 per cent.	15	325	1	20	236	5,235	2,856	61,945	73	1,745	1	20	1,221	27,785
30 to 39 per cent.	7	220			97	3,015	1,436	43,360	33	1,070			452	14,190
40 to 49 per cent.	2	85			55	2,150	778	30,030	27	1,040			207	8,125
50 to 59 per cent.	3	155	4	180	132	6,220	1,214	57,810	48	2,370			688	32,715
60 to 69 per cent.			1	60	34	2,025	369	21,210	12	655			112	6,540
70 to 79 per cent.	2	145	7	505	45	3,155	307	21,155	16	1,130			173	11,900
80 to 89 per cent.					7	555	44	3,360	6	515			17	1,285
90 to 99 per cent.					1	95	5	440	2	175			4	340
Total	51	1,230	15	785	862	25,480	9,437	268,540	264	9,225	4	50	3,707	112,625
Permanent partial:														
10 to 19 per cent.	226	3,170			2,184	29,465	2,782	35,960	73	940	1	15	1,018	13,570
20 to 29 per cent.	98	2,185			1,292	29,840	2,492	57,135	39	945	2	50	737	18,015
30 to 39 per cent.	20	660	1	35	510	16,955	856	27,685	25	830			436	15,175
40 to 49 per cent.	14	625			238	10,135	439	18,265	24	1,000			153	6,665
50 to 59 per cent.	12	615	3	130	276	14,200	738	37,255	33	1,675	2	105	196	10,125
60 to 69 per cent.	2	125			133	8,395	152	9,445	5	320			30	1,885
70 to 79 per cent.	3	215	1	75	98	7,210	121	8,930	10	745			32	2,360
80 to 89 per cent.	1	80			40	3,340	23	1,905	2	170			5	420
90 to 99 per cent.					10	910	1	95	2	190			4	370
Total	376	7,675	5	240	4,781	120,450	7,604	196,675	213	6,815	5	170	2,611	68,585
Temporary total (100 per cent.)	3	250	15	1,350	236	21,410	867	79,560	90	8,170			470	42,290
Permanent total (100 per cent.)	3	300	25	2,700	136	14,020	1,244	127,280	175	19,690			194	19,945
Grand total	433	9,455	60	5,075	6,015	181,360	19,152	672,055	742	43,900	9	220	6,982	243,445

TABLE NO. 37.—*Compensation, active disability cases; degree of impairment and extent of disability correlated with classification of major disability, showing number and amount of monthly payments, as of June 30, 1927—Continued*

Extent and degree of impairment	Ear, nose, and throat		Endocrines		Eye and annexa		Genitourinary system		Hernia		Joints and bursae		Lymphatic system	
	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment
Temporary partial:														
10 to 19 per cent.	1,287	\$16,125	486	\$6,245	246	\$3,035	306	\$3,325	174	\$2,045	1,822	\$22,870	13	\$145
20 to 29 per cent.	936	20,545	905	20,190	154	3,425	352	8,165	218	5,030	1,657	36,890	2	40
30 to 39 per cent.	651	20,080	260	8,305	117	3,495	144	4,405	151	4,770	594	18,355	2	60
40 to 49 per cent.	448	17,790	92	3,660	91	3,660	97	3,715	94	2,600	340	13,470		
50 to 59 per cent.	420	20,450	140	6,815	114	5,580	274	12,985	31	1,530	607	28,685	7	340
60 to 69 per cent.	215	12,890	50	2,960	64	3,735	155	7,705	9	515	148	8,590		
70 to 79 per cent.	182	12,120	210	14,260	59	4,085	149	10,405	9	625	241	16,385		
80 to 89 per cent.	81	6,180	71	5,330	38	3,025	19	1,460	1	65	44	3,330		
90 to 99 per cent.	26	2,275	8	720	19	1,615	3	265			8	705		
Total	4,251	128,435	2,222	68,505	902	31,605	1,511	52,430	657	17,180	5,481	149,280	24	585
Permanent partial:														
10 to 19 per cent.	1,885	25,975	144	2,025	668	8,980	578	6,515	341	4,420	9,787	136,715	17	195
20 to 29 per cent.	1,411	34,105	159	3,820	615	14,780	254	6,060	412	10,170	5,803	133,620	4	95
30 to 39 per cent.	1,019	34,480	35	1,225	1,074	34,680	105	8,470	249	8,885	2,225	74,595	2	70
40 to 49 per cent.	763	32,695	19	820	829	35,295	233	13,065	118	5,200	1,322	57,320		
50 to 59 per cent.	592	30,975	38	1,910	579	29,925	212	10,960	91	4,700	1,165	60,640	8	405
60 to 69 per cent.	350	21,995	11	710	1,125	68,605	66	3,485	12	755	562	35,580		
70 to 79 per cent.	273	20,090	23	1,725	171	12,500	41	3,055	11	810	357	26,450		
80 to 89 per cent.	197	16,525	10	840	101	8,450	12	990	3	255	146	12,185		
90 to 99 per cent.	69	6,280			41	3,865	3	270			33	3,070		
Total	6,559	223,120	439	13,075	5,198	217,030	1,584	47,870	1,237	35,195	21,400	540,185	31	765
Temporary total (100 per cent.)	118	10,580	291	26,170	65	6,080	272	24,675	59	5,130	742	67,395	15	1,245
Permanent total (100 per cent.)	265	26,470	183	18,505	607	102,710	282	28,510	30	3,010	685	76,130	6	600
Double permanent total (200 per cent.)					14	3,350					11	2,600		
Grand total	11,193	388,605	3,135	126,255	6,786	360,775	3,649	153,485	1,933	60,515	28,299	835,590	76	3,195

Extent and degree of impairment	Muscles, fasciae, tendons, and tendon sheaths		Nervous system		Obstetric and gynecological conditions		Parasitic diseases		Psychiatric diseases		Respiratory system		Skin and its appendages	
	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment
Temporary partial:														
10 to 19 per cent.	272	\$3,370	1,440	\$19,500	2	\$30	45	\$490	410	\$5,420	2,930	\$32,375	327	\$3,740
20 to 29 per cent.	168	3,680	5,000	115,255			104	2,375	1,485	34,635	2,034	42,725	252	5,390
30 to 39 per cent.	79	2,450	1,767	55,925	1	25	29	925	536	17,295	838	24,615	86	2,620
40 to 49 per cent.	35	1,395	1,146	45,800			16	645	862	32,865	232	9,310	39	1,525
50 to 59 per cent.	46	2,230	1,458	71,405			210	9,880	1,208	57,140	716	34,050	86	4,065
60 to 69 per cent.	17	1,070	599	34,970			41	2,355	597	53,515	97	5,705	17	955
70 to 79 per cent.	15	1,040	791	54,040			36	2,465	829	55,070	534	37,150	19	1,325
80 to 89 per cent.	2	175	222	17,100			8	615	170	12,720	67	5,105	3	225
90 to 99 per cent.	1	105	26	2,210			2	170	21	1,740	3	250	1	75
Total	635	15,515	12,449	416,205	3	55	491	19,920	6,118	250,400	7,451	191,285	830	19,920
Permanent partial:														
10 to 19 per cent.	1,954	28,155	1,726	23,910	2	20	22	255	214	2,910	3,304	39,950	2,592	36,800
20 to 29 per cent.	1,638	37,130	2,435	58,280			30	735	414	10,090	1,586	37,125	1,446	32,785
30 to 39 per cent.	541	17,925	1,355	45,865			8	265	173	6,055	469	15,310	377	12,535
40 to 49 per cent.	224	9,600	1,064	45,780	1	45	18	855	203	8,815	153	6,455	103	4,405
50 to 59 per cent.	180	9,305	1,338	69,630	2	100	13	640	247	12,860	368	18,590	123	6,215
60 to 69 per cent.	83	5,250	665	42,060			5	310	91	5,745	51	3,180	21	1,330
70 to 79 per cent.	35	2,595	630	46,610			7	525	152	11,180	204	15,180	13	960
80 to 89 per cent.	19	1,580	261	21,750					47	3,920	27	2,195	6	470
90 to 99 per cent.	6	555	48	4,415			1	90	4	370	4	365	1	90
Total	4,680	112,095	9,522	358,300	5	165	104	3,675	1,545	61,945	6,166	138,350	4,682	95,590
Temporary total (100 per cent)	53	4,815	943	84,015			115	10,745	3,232	240,805	558	51,230	93	8,095
Permanent total (100 per cent)	39	4,030	2,302	247,655			23	2,400	13,409	927,185	366	36,660	19	1,925
Double permanent total (200 per cent)			8	2,000					2	220				
Grand total	5,407	136,455	25,224	1,108,175	8	220	733	36,740	24,306	1,480,555	14,541	417,825	5,624	125,530

523
943
2916

TABLE NO. 37.—*Compensation, active disability cases; degree of impairment and extent of disability correlated with classification of major disability, showing number and amount of monthly payments, as of June 30, 1927—Continued*

Extent and degree of impairment	Tuberculosis		Tumors		Venereal diseases		Miscellaneous		Amputations		Fractures		Total	
	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment	Number	Monthly payment
Temporary partial:														
10 to 19 per cent.....	457	\$4,950	30	\$350	3	\$35	142	\$1,650	10	\$100	50	\$500	14,044	\$169,180
20 to 29 per cent.....	395	8,685	25	520	7	155	104	2,260	22	490	53	1,140	18,308	408,670
30 to 39 per cent.....	190	5,770	10	295	2	70	44	1,335	14	420	33	1,055	7,573	234,105
40 to 49 per cent.....	65	2,615	4	140	1	35	39	1,535	11	460	19	760	4,670	183,410
50 to 59 per cent.....	1,199	58,490	15	700	9	435	51	2,470	19	940	28	1,345	8,727	418,985
60 to 69 per cent.....	378	21,435	6	335	5	270	13	770	13	805	15	865	2,950	169,955
70 to 79 per cent.....	3,023	209,475	7	475	11	725	18	1,210	18	1,280	21	1,480	6,722	461,615
80 to 89 per cent.....	301	22,605	2	150			5	360	20	1,495	10	785	1,138	86,440
90 to 99 per cent.....	28	2,375							10	925	4	340	172	14,820
Total.....	6,036	336,400	99	2,965	38	1,725	416	11,590	127	6,915	213	8,330	64,364	2,147,186
Permanent partial:														
10 to 19 per cent.....	1,338	15,395	79	1,040	2	30	3,350	44,545	1,612	21,505	2,701	36,420	38,595	518,830
20 to 29 per cent.....	576	12,740	43	980	2	50	1,761	39,650	1,076	25,365	1,646	38,450	25,991	604,170
30 to 39 per cent.....	726	4,135	19	630			391	12,810	501	16,900	739	24,240	11,246	375,415
40 to 49 per cent.....	60	2,540	13	550	1	40	130	5,535	482	21,570	401	17,255	7,095	304,550
50 to 59 per cent.....	28,745	1,428,125	12	615	5	250	151	7,740	543	29,215	217	16,690	35,989	1,808,685
60 to 69 per cent.....	69	4,375	5	310	1	60	46	2,890	909	58,405	197	12,485	4,581	287,600
70 to 79 per cent.....	88	6,585	5	370			34	2,500	729	53,165	139	10,205	3,177	234,040
80 to 89 per cent.....	29	2,380	2	170	1	90	14	1,165	959	81,015	56	4,705	1,991	164,610
90 to 99 per cent.....	9	845	2	170			1	90	295	27,340	18	1,660	552	51,040
Total.....	31,040	1,477,120	180	4,915	12	520	5,878	116,915	7,106	334,580	6,224	162,110	129,187	4,344,690
Temporary total (100 per cent).....	9,418	855,845	42	3,800	42	3,645	63	5,660	68	6,120	62	5,575	17,982	1,574,655
Permanent total (100 per cent).....	11,244	1,158,800	98	10,350	90	10,210	84	8,435	558	69,850	64	6,440	32,109	2,914,840
Double permanent total (200 per cent).....	16	2,200							3	750			49	11,130
Grand total.....	57,748	3,830,365	419	21,930	191	16,100	6,441	142,600	7,672	409,215	6,553	182,455	243,611	10,991,795

129,187
32,140
48
161,375

TABLE No. 38.—*Compensation, active disability awards; relationship of beneficiary to claimant, showing number and amount of monthly payment, as of June 30, 1927*

Beneficiary relationship	Number	Monthly payment
Self.....	24,374	
Self and child.....	185,749	\$8,260,625
Self and children (2).....	974	45,030
Self and children (3).....	428	21,680
Self and children (4).....	121	5,710
Self and children (5).....	36	1,615
Self and children (6).....	8	400
Self and wife.....	2	95
Self, wife, and child.....	15,649	688,085
Self, wife, and children (2).....	14,559	665,685
Self, wife, and children (3).....	11,681	548,330
Self, wife, and children (4).....	5,065	276,910
Self, wife, and children (5).....	1,984	102,780
Self, wife, and children (6).....	590	32,200
Self, wife, and children (7).....	183	10,205
Self, wife, and children (8).....	47	3,340
Self, wife, and children (9).....	12	815
Self, wife, and children (9).....	2	235
Self, and parent or parents.....	3,660	195,680
Self, parent or parents, and child.....	78	4,890
Self, parent or parents, and children (2).....	20	1,275
Self, parent or parents, and children (3).....	5	105
Self, parent or parents, and children (4).....	2	100
Self, parent or parents, and children (5).....	2	55
Self, wife, and parent or parents.....	962	49,295
Self, wife, parent or parents, and child.....	646	35,495
Self, wife, parent or parents, and children (2).....	420	25,200
Self, wife, parent or parents, and children (3).....	193	12,560
Self, wife, parent or parents, and children (4).....	41	2,420
Self, wife, parent or parents, and children (5).....	9	710
Self, wife, parent or parents, and children (6).....	2	125
Self, wife, parent or parents, and children (7).....	1	145
Total.....	243,611	10,991,795

TABLE No. 39.—*Compensation, active death awards; number of deceased veterans showing relation of dependents to veteran and amount of monthly payments to dependents, as of June 30, 1927*

Beneficiary relationship	Number	Monthly payment
Widow.....	7,232	\$216,050
Widow and child.....	4,932	196,435
Widow and children (2).....	2,203	98,920
Widow and children (3).....	676	33,815
Widow and children (4).....	228	13,545
Widow and children (5).....	61	3,945
Widow and children (6).....	18	1,260
Widow and children (7).....	10	750
Child.....	4,483	89,705
Children (2).....	1,194	35,725
Children (3).....	312	12,480
Children (4).....	60	2,680
Children (5).....	16	766
Children (6).....	1	55
Children (8).....	1	65
Parent or parents.....	56,404	1,264,655
Parent or parents and child.....	1,444	61,475
Parent or parents and children (2).....	274	14,625
Parent or parents and children (3).....	56	3,515
Parent or parents and children (4).....	13	865
Parent or parents and children (5).....	3	215
Parent or parents and children (6).....	1	75
Widow and parent or parents.....	1,796	93,855
Widow, parent or parents, and child.....	957	59,815
Widow, parent or parents, and children (2).....	329	22,045
Widow, parent or parents, and children (3).....	93	6,590
Widow, parent or parents, and children (4).....	24	1,800
Widow, parent or parents, and children (5).....	9	650
Widow, parent or parents, and children (6).....	1	75
Total.....	82,827	2,255,855

TABLE No. 40.—*Compensation, active death awards; number of deceased veterans whose dependents are receiving compensation or compensation and insurance payments, with amount of monthly payments to dependents, as of June 30, 1927*

Kind of claim	Number	Monthly compensation payment
Compensation only.....	19,158	\$587,309
Compensation and contract (term) insurance.....	58,823	1,587,105
Compensation and automatic insurance.....	3,581	80,805
Compensation and United States Government life insurance.....	1,083	30,000
Compensation and contract term insurance and United States Government life insurance.....	173	5,645
Total.....	82,827	2,255,855

REHABILITATION TABLE

TABLE NO. 41.—*Rehabilitation activities as of the close of each fiscal year from 1919 to 1927, showing the origin of each status*¹

Fiscal year	Pending eligibility	Rated eligible	Pending registration	Registered unassigned	Deceased before assignment	Registered assigned
1921.....	16, 071	256, 378	-----	41, 339	-----	215, 039
1922.....	56, 289	305, 274	-----	3, 838	*2, 197	289, 511
1923.....	7, 494	320, 791	*4, 838	12, 820	1, 592	226, 260
				Pending assignment		
1924.....	5, 296	330, 943	1, 144	4, 276	*1, 608	*188, 661
1925.....	-----	334, 864	-----	-----	-----	-----
1926.....	-----	334, 578	-----	-----	-----	-----

Fiscal year	Registration canceled	Lapsed eligibility	In process of induction	Declined	Deferred	Deceased before induction
1921.....	-----	-----	53, 613	14, 536	36, 709	1, 684
1922.....	-----	*9, 728	40, 383	*38, 241	*55, 396	3, 127
1923.....	14, 262	70, 019	9, 537	7, 693	35, 902	5, 313
				Pending induction		
1924.....	31, 726	103, 528	-----	8, 213	-----	6, 816
1925.....	36, 580	111, 076	-----	-----	-----	7, 461
1926.....	35, 283	111, 358	-----	-----	-----	7, 823

Fiscal year	Total entered training	Training interrupted	In training	Discontinued	Deceased after induction	Rehabilitated and completed
1919.....	3, 606	-----	3, 192	-----	-----	414
1920.....	46, 414	-----	38, 797	-----	-----	7, 617
1921.....	108, 497	14, 049	85, 338	2, 490	1, 570	5, 050
1922.....	152, 364	26, 258	102, 108	6, 283	749	16, 966
1923.....	167, 815	27, 498	80, 359	16, 864	1, 329	41, 765
1924.....	173, 632	4, 820	45, 347	42, 989	1, 845	78, 631
1925.....	179, 747	1, 134	21, 803	48, 134	2, 068	106, 608
1926.....	180, 109	2, 027	-----	49, 071	1, 976	127, 035
1927.....	179, 358	53	185	48, 891	2, 030	128, 199

¹ All data in this table are status figures as of the end of each month.

* "Deceased before assignment" was separated from "registered unassigned."

* "Pending registration" was separated from "pending eligibility" on this date.

* "Deceased before assignment" changed to "deceased before induction."

* Status discontinued at time of reorganization.

* "Lapsed eligibility" was counted in "declined" and "deferred" prior to July 1, 1922. "Lapsed eligibility" is not included in "registered assigned."

INSURANCE TABLES

TABLE No. 42.—Number of United States Government term and converted insurance claims received by fiscal years from 1918 to 1927

Fiscal year	Term insurance claims	Converted insurance claims	Total	Fiscal year	Term insurance claims	Converted insurance claims	Total
Total to June 30, 1918.....	13,318	-----	13,318	1924.....	13,086	1,598	14,684
1919.....	105,382	-----	105,382	1925.....	15,788	1,795	17,583
1920.....	20,302	220	20,522	1926.....	20,842	2,298	23,140
1921.....	21,868	1,224	23,092	1927.....	13,072	2,454	15,526
1922.....	15,610	1,252	16,862				
1923.....	14,604	1,630	16,234	Grand total.....	253,872	12,471	266,343

TABLE No. 43.—Number of United States Government term and converted insurance death and disability awards, by fiscal years, from 1918 to 1927

Fiscal year	Insurance awards								
	Term insurance			Converted insurance			Total		
	Death	Disability	Total	Death	Disability	Total	Death	Disability	Total
To June 30, 1918.....	5,722	-----	5,722	-----	-----	-----	5,722	-----	5,722
1919.....	98,695	226	98,921	-----	-----	-----	98,695	226	98,921
1920.....	23,779	3,030	26,809	104	1	105	23,883	3,031	26,914
1921.....	7,620	4,685	12,275	509	76	585	8,129	4,731	12,860
1922.....	5,501	3,090	8,591	937	310	1,247	6,438	3,400	9,838
1923.....	4,132	1,138	5,270	983	336	1,319	5,115	1,474	6,589
1924.....	2,806	863	3,669	968	378	1,346	3,774	1,241	5,015
1925.....	2,744	1,252	3,996	1,119	345	1,464	3,863	1,597	5,460
1926.....	2,792	1,554	4,346	1,187	663	1,850	3,979	2,217	6,196
1927.....	1,540	451	1,991	1,389	568	1,957	2,929	1,019	3,948
Total.....	155,331	16,259	171,590	7,196	2,677	9,873	162,527	18,936	181,463

TABLE NO. 44.—*Term insurance, active disability and death awards; classification of major disability causing permanent total disability or death of veteran, and amount of insurance in force, as of June 30, 1927*

Classification	Disability		Death		Total	
	Number of veterans	Amount	Number of veterans	Amount	Number of veterans	Amount
Abnormalities and congenital malformations.....	2	\$7,000	1	\$3,000	3	\$10,000
Blood and blood-forming organs.....	14	130,448	233	1,911,106	247	2,041,554
Bones and cartilages.....	67	574,313	58	479,857	125	1,054,170
Circulatory system.....	593	4,287,966	3,001	24,659,902	3,594	28,947,868
Communicable and infectious diseases.....	76	604,477	3,873	34,186,271	3,949	34,790,748
Digestive system.....	93	733,895	2,156	18,113,067	2,249	18,846,962
Ear, nose, and throat.....	89	601,547	248	2,112,907	337	2,714,454
Endocrines.....	91	699,297	544	4,671,621	635	5,370,918
Eye and annexa.....	355	2,949,813	13	115,278	368	3,065,091
Genito-urinary system.....	167	1,363,654	1,423	11,787,318	1,590	13,150,972
Hernia.....	13	104,910	36	343,367	49	448,277
Joints and bursæ.....	338	2,584,689	47	354,236	385	2,938,925
Lymphatic system.....	2	14,707	111	913,427	113	928,134
Muscles, fasciæ, tendons, and tendon sheaths.....	9	77,000	5	34,908	14	111,908
Nervous system.....	1,016	7,771,682	2,461	21,299,170	3,477	29,070,852
Obstetric and gynecological conditions.....	1	10,000	5	40,000	6	50,000
Parasitic diseases.....	11	63,120	33	229,472	44	292,592
Poisonings and intoxications.....	3	20,000	519	4,217,937	522	4,237,937
Psychiatric diseases.....	3,991	32,232,727	530	4,061,908	4,521	36,294,635
Respiratory system.....	155	1,035,473	50,112	460,446,456	50,267	461,481,929
Skin and its appendages.....	7	38,194	43	355,255	50	393,449
Tuberculosis.....	4,404	34,371,553	14,932	119,002,504	19,336	153,374,057
Tumors.....	51	436,226	866	7,173,222	917	7,609,448
Venereal diseases.....	68	535,704	154	1,250,866	222	1,786,570
Miscellaneous ¹	164	1,424,480	58,964	532,174,756	59,128	533,599,236
Amputations.....	499	4,541,699	43	373,557	542	4,915,256
Fractures.....	56	486,196	676	5,569,111	732	6,055,307
Total.....	12,335	97,700,770	141,087	1,255,880,479	153,422	1,353,581,249

¹ Includes battle deaths, accidents, and injuries.

TABLE NO. 45.—Term insurance, terminated disability and death awards; classification of major disability of veteran and reasons for termination, showing amount of insurance in force, as of June 30, 1927

Classification	Disability						Death	
	Recovery		Death		Total		Lump-sum payments	
	Number of veterans	Amount	Number of veterans	Amount	Number of veterans	Amount	Number of veterans	Amount
Abnormalities and congenital malformations.....	2	\$20,000	---	---	2	\$20,000	---	---
Blood and blood-forming organs.....	2	13,000	108	\$888,976	110	901,976	15	\$115,009
Bones and cartilages.....	132	1,185,029	27	230,130	159	1,415,159	4	33,091
Circulatory system.....	65	555,552	720	6,121,092	785	6,676,644	152	1,068,250
Communicable and infectious diseases.....	11	90,000	77	670,558	88	760,558	211	1,577,598
Digestive system.....	18	169,000	220	1,988,640	244	2,157,640	100	709,138
Ear, nose, and throat.....	32	297,060	54	314,512	86	611,512	14	88,107
Endocrines.....	16	145,000	335	2,969,396	352	3,144,396	14	121,314
Eye and annexa.....	39	340,976	41	359,000	79	699,976	1	10,000
Genitourinary system.....	44	353,377	523	4,448,768	567	4,832,145	63	463,589
Hernia.....	2	20,000	12	110,000	14	130,000	4	23,000
Joints and bursae.....	94	875,828	74	639,502	168	1,516,330	3	11,636
Lymphatic system.....	1	10,000	63	512,354	64	522,354	2	19,621
Muscles, fascia, tendons, and tendon sheaths.....	3	27,000	4	25,000	7	52,000	---	---
Nervous system.....	137	1,169,949	424	3,599,779	561	4,769,728	130	882,832
Parasitic diseases.....	3	30,000	5	30,930	8	60,930	2	15,000
Poisonings and intoxications.....	1	10,000	5	50,000	6	60,000	21	157,656
Psychiatric diseases.....	238	2,037,234	753	6,420,487	991	8,457,721	41	297,327
Respiratory system.....	70	584,935	295	2,616,830	365	3,201,765	2,871	21,821,684
Skin and its appendages.....	2	20,000	7	42,205	9	62,205	---	---
Tuberculosis.....	1,673	14,216,703	10,602	89,708,554	12,365	103,925,257	866	6,483,574
Tumors.....	13	115,000	358	3,030,377	371	3,145,377	42	270,968
Veneral diseases.....	18	150,000	91	777,433	109	927,433	8	45,078
Miscellaneous ¹	145	1,334,000	92	801,442	237	2,135,442	3,672	22,630,003
Amputations.....	119	1,088,500	51	475,500	170	1,564,000	3	30,000
Fractures.....	145	1,332,500	16	117,557	161	1,450,057	30	197,161
Total.....	3,024	26,221,583	15,034	126,979,022	18,058	153,200,605	7,669	57,071,636

¹ Includes battle deaths, accidents, and injuries.

TABLE NO. 46.—Automatic insurance, active disability and death awards; classification of major disability, causing permanent total disability or death of veteran and amount of insurance in force, as of June 30, 1927

Classification	Disability		Death		Total	
	Number of veterans	Amount	Number of veterans	Amount	Number of veterans	Amount
Blood and blood-forming organs.....			8	\$34,752	8	\$34,752
Bones and cartilages.....			2	8,688	2	8,688
Circulatory system.....	3	\$13,032	247	1,068,397	250	1,081,429
Communicable and infectious diseases.....	2	8,688	460	1,997,732	462	2,006,420
Digestive system.....			183	794,915	183	794,915
Ear, nose, and throat.....	4	17,376	26	112,090	30	129,466
Endocrines.....			39	163,710	39	163,710
Eye and annexa.....	9	39,096			9	39,096
Genito-urinary system.....	2	8,688	87	380,852	89	389,540
Hernia.....			3	13,032	3	13,032
Joints and bursæ.....	3	13,032	5	21,720	8	34,752
Lymphatic system.....			4	17,376	4	17,376
Muscles, fasciæ, tendons, and tendon sheaths.....			1	4,344	1	4,344
Nervous system.....	13	56,472	438	1,902,672	451	1,959,144
Parasitic diseases.....			2	8,688	2	8,688
Poisonings and intoxications.....			94	408,336	94	408,336
Psychiatric diseases.....	173	751,512	58	249,811	231	1,001,323
Respiratory system.....			3,621	15,726,830	3,621	15,726,830
Skin and its appendages.....			4	17,376	4	17,376
Tuberculosis.....	74	321,456	723	3,060,412	797	3,381,868
Tumors.....	1	4,344	31	133,240	32	137,584
Veneral diseases.....	1	4,344	17	73,848	18	78,192
Miscellaneous ¹	3	13,032	1,447	6,284,476	1,450	6,297,508
Amputations.....	10	43,440	8	34,404	18	77,844
Fractures.....	1	4,344	89	386,616	90	390,960
Total.....	299	1,298,856	7,597	32,904,317	7,896	34,203,173

¹ Includes battle deaths, accidents, and injuries.

TABLE NO. 47.—Automatic insurance, terminated disability and death awards; classification of major disability of veterans and reasons for termination, as of June 30, 1927

Classification	Disability						Death	
	Recovery		Death		Total		No beneficiary in permitted class	
	Number of veterans	Amount	Number of veterans	Amount	Number of veterans	Amount	Number of veterans	Amount
Blood and blood-forming organs.....							1	\$4,344
Circulatory system.....	2	\$8,688	8	\$34,752	10	\$43,440	24	104,256
Communicable and infectious diseases.....			1	4,344	1	4,344	37	160,728
Digestive system.....	1	4,344	2	8,688	3	13,032	16	69,504
Ear, nose, and throat.....	2	8,688			2	8,688		
Endocrines.....	1	4,344	2	8,688	3	13,032	1	4,344
Genito-urinary system.....			3	13,032	3	13,032	10	43,440
Hernia.....							1	4,344
Joints and bursæ.....							2	8,688
Nervous system.....	1	4,344	3	13,032	4	17,376	38	165,072
Poisonings and intoxications.....							14	60,816
Psychiatric diseases.....	8	34,752	17	73,848	25	108,600	6	26,064
Respiratory system.....			2	8,688	2	8,688	292	1,268,448
Tuberculosis.....	35	152,040	176	764,544	211	916,584	57	247,309
Veneral diseases.....			1	4,344	1	4,344	2	8,688
Miscellaneous ¹							111	482,184
Amputations.....			1	4,344	1	4,344		
Fractures.....							1	4,344
Total.....	50	217,200	216	938,304	266	1,155,504	613	2,662,573

¹ Includes battle deaths, accidents, and injuries.

TABLE NO. 48.—*Converted insurance death claims awarded during calendar year 1926, classified by plan of insurance*

Plan of insurance	Effective date of award																		Total			Per cent of total								
	1919		1920		1921		1922		1923		1924		1925			1926														
	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount						
Ordinary life.....						1	1	\$2,500	2	2	\$7,000	2	2	\$9,718	1	1	\$1,000	62	57	\$314,203	330	301	\$1,888,772	398	364	\$2,223,193	28.05	28.26	36.33	
20-payment life.....									2	2	3,968	3	3	19,395	5	4	21,864	64	55	272,499	270	242	1,250,294	344	306	1,568,020	24.24	23.78	25.62	
30-payment life.....											1	1	1,843				8	6	37,000	33	26	175,854	42	33	214,697	2.96	2.56	3.51		
20-year endowment.....	1	1	\$997			3	3	4,000				1	1	2,000	9	9	23,997	79	77	260,528	301	279	942,303	394	370	1,233,025	27.77	28.73	20.16	
30-year endowment.....																	15	15	62,532	57	47	237,820	72	62	300,352	5.07	4.81	4.91		
Endowment at 62.....				1	1	\$5,000				1	1	2,000	2	2	1,981	2	2	2,845	20	17	77,118	48	40	271,539	68	57	348,657	7.79	7.43	5.77
Extended insurance.....																	32	31	67,239	62	58	151,391	100	95	230,456	4.75	7.37	8.70		
Paid-up endowment.....																	1	1	125			125	1	1	125	.07	.08	-----		
Total.....	1	1	997	1	1	5,000	4	4	6,500	5	5	12,968	9	9	34,937	17	16	49,706	281	259	1,091,244	1,101	993	4,917,973	1,419	1,288	6,119,325	100.00	100.00	100.00

TABLE NO. 49.—Total converted insurance disability claims awarded during calendar year 1926, classified by plan of insurance

Plan of insurance	Effective date of award																		Total			Per cent of total		
	1920			1921			1922			1923			1924			1925								
	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount
Ordinary life				2	2	\$5,000	1	1	\$10,000				8	8	\$31,261	88	74	\$451,596	239	215	\$1,362,013	338	300	\$1,859,870
20-payment life	1	1	\$3,170	1		5,000	1	1	5,000	1	1	\$2,000	7	7	29,000	62	58	299,780	98	85	429,769	171	153	773,719
30-payment life							1	1	3,000				1	1	5,000	7	5	31,514	20	13	90,500	29	20	130,014
20-year endowment	2	2	2,000	1	1	5,000	1	1	1,009	3	3	6,214	9	7	31,997	79	73	178,412	104	99	301,914	199	186	526,546
30-year endowment													1	1	3,000	11	10	54,500	22	18	85,527	34	29	143,027
Endowment at 62													2	2	3,060	11	8	44,000	25	22	131,711	38	32	178,711
Extended insurance							1	1	1,000	2	2	12,000				27	26	47,195	18	18	34,111	48	47	94,306
Paid-up life																1	1	451				1	1	451
Paid-up endowment																1	1	296				1	1	296
Total	3	3	5,170	4	3	15,000	5	5	20,009	6	6	20,214	28	26	103,258	287	256	1,107,744	526	470	2,435,545	859	769	3,706,940

Total.....

TABLE NO. 50.—*Converted insurance disability claims terminated during calendar year 1926 on account of death of insured, classified by plan of insurance*

Plan of insurance	Duration of disability															
	One-half year				1 year				2 years				3 years			
	Number	Lives	Amount of insurance	Com-muted value at death	Number	Lives	Amount of insurance	Com-muted value at death	Number	Lives	Amount of insurance	Com-muted value at death	Number	Lives	Amount of insurance	Com-muted value at death
Ordinary life.....	8	8	\$33,000	\$32,380	20	20	\$120,000	\$114,972	9	8	\$49,000	\$44,895	8	8	\$52,000	\$45,477
20-payment life.....	5	5	12,000	11,742	15	13	64,500	62,091	11	10	57,000	52,291	8	8	23,000	20,188
30-payment life.....	1	1	3,000	2,918	2	2	11,000	10,457								
20-year endowment.....	4	4	10,497	10,289	17	14	43,500	41,104	9	9	23,000	21,313	6	6	25,000	22,054
30-year endowment.....	1	1	3,000	3,000	5	5	20,500	19,797					3	3	11,000	9,815
Ending at 62.....	1	1	1,000	970	1	1	4,000	2,654								
Extended insurance.....	1	1	1,000	967	2	2	6,338	5,968					4	3	9,000	7,749
Total.....	21	21	63,497	62,266	62	57	269,838	257,043	29	27	129,000	118,499	29	28	120,009	105,283

Plan of insurance	Duration of disability										Total				Per cent of total		
	5 years				6 years				7 years								
	Number	Lives	Amount of insurance	Com-muted value at death	Number	Lives	Amount of insurance	Com-muted value at death	Number	Lives	Amount of insurance	Com-muted value at death	Number	Lives	Amount of insurance	Com-muted value at death	Amount of insurance
Ordinary life.....	7	7	\$40,000	\$32,245	1	1	\$5,000	\$3,997					59	58	\$339,000	\$308,131	33.91
20-payment life.....	2	2	15,000	12,269					1	1	\$1,000	\$743	49	45	204,500	186,750	35.15
30-payment life.....													3	3	14,000	13,375	27.27
20-year endowment.....	4	4	9,000	7,158	1	1	2,000	1,521					44	41	116,006	105,972	1.72
30-year endowment.....													9	9	34,500	32,612	1.82
Ending at 62.....													2	2	5,000	3,624	25.29
Extended insurance.....	1	1	1,000	817									8	7	17,338	15,501	24.85
Total.....	14	14	65,000	52,489	2	2	7,000	5,518	1	1	1,000	743	174	165	730,344	665,965	5.17

TABLE NO. 51.—*Converted insurance disability claims terminated during calendar year 1926 on account of recovery, classified by plan of insurance*

Plan of insurance	Duration of disability															
	One-half year				1 year				2 years				3 years			
	Num- ber	Lives	Amount of in- surance	Com- muted value at re- covery	Num- ber	Lives	Amount of in- surance	Com- muted value at re- covery	Num- ber	Lives	Amount of in- surance	Com- muted value at re- covery	Num- ber	Lives	Amount of in- surance	Com- muted value at re- covery
Ordinary life.....	2	1	\$10,000	\$9,757	1	1	\$5,000	\$4,834	2	2	\$15,000	\$14,048	4	4	\$17,000	\$15,124
20-payment life.....					2	2	7,000	6,827	2	2	12,000	10,964	1	1	2,000	1,785
30-payment life.....													1	1	5,000	4,479
20-year endowment.....					1	1	2,000	1,940	3	3	11,997	11,127	3	3	13,500	12,053
30-year endowment.....													1	1	5,000	4,866
Endowment at 62.....					1	1	2,000	1,946								
Extended insurance.....																
Total.....	2	1	10,000	9,757	5	5	16,000	15,547	7	7	38,997	36,139	10	10	42,500	37,807

Plan of insurance	Duration of disability—Continued								Total				Per cent of total		
	5 years				6 years										
	Num- ber	Lives	Amount of in- surance	Com- muted value at re- covery	Num- ber	Lives	Amount of in- surance	Com- muted value at re- covery	Num- ber	Lives	Amount of in- surance	Com- muted value at re- covery	Number	Lives	Amount of in- surance
Ordinary life.....	4	3	\$17,000	\$13,754	4	3	\$25,000	\$19,264	27	24	\$159,000	\$137,309	45.76	43.63	60.82
20-payment life.....	1	1	2,000	1,606	2	2	6,000	4,642	12	11	36,878	32,424	20.34	20.00	14.36
30-payment life.....									1	1	5,000	4,479	1.70	1.82	1.98
20-year endowment.....	4	4	5,000	3,916	2	2	12,000	9,270	15	15	45,732	39,370	25.42	27.27	17.44
30-year endowment.....					1	1	5,000	3,839	2	2	10,000	8,205	3.39	3.64	3.63
Endowment at 62.....	1	1	2,500	2,041					2	2	4,500	3,987	3.39	3.64	1.77
Extended insurance.....															
Total.....	10	9	26,500	21,317	9	8	48,000	37,015	59	55	261,110	225,774	100.00	100.00	100.00

TABLE NO. 53.—Total converted insurance disability claims awarded during calendar year 1926, classified by cause of disability

Classification	Effective date of award																		Total			Per cent of total						
	1920			1921			1922			1923			1924			1925									1926			
	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	Number	Lives	Amount	
Abnormalities and congenital malformations													2	2	\$20,000							2	2	\$20,000	0.23	0.26	0.54	
Blood and blood-forming organs													1	1	\$5,000				4	4	\$13,000				18,000	.58	.65	.49
Bones and cartilages																			2	2	2,969				2,969	.23	.26	.08
Circulatory system							1	1	\$10,000				1	1	10,000	18	14	93,000	50	44	228,494	70	60	346,494	8.15	7.80	9.35	
Communicable and infectious diseases													6	6	32,000	6	6	32,000	13	8	51,500	20	15	93,500	2.33	1.95	2.52	
Digestive system													1	1	3,000	1	1	3,000	3	3	21,000	4	4	24,000	.47	.52	.65	
Ear, nose, and throat													1	1	10,000	5	5	34,533	11	10	53,000	17	16	97,533	1.98	2.08	2.63	
Endocrines													4	4	24,000	4	4	24,000	11	11	47,000	15	15	71,000	1.75	1.95	1.92	
Eye and annexa	1	1	\$1,000										2	2	12,000	2	2	12,000	5	5	27,500	5	5	27,500	.58	.65	.74	
Genito-urinary system													2	2	6,500	2	2	6,500	5	4	31,426	7	6	37,926	.81	.78	1.02	
Hernia													1	1	10,000	1	1	10,000				1	1	10,000	.12	.13	.27	
Joints and bursae													1	1	3,000	9	9	38,000	11	10	44,548	21	20	85,548	2.44	2.60	2.31	
Lymphatic system																			1	1	10,000				10,000	.12	.13	.27
Nervous system				1	1	\$3,000							9	9	24,566	29	26	94,557	44	40	188,652	83	76	310,775	9.66	9.88	8.38	
Parasitic													1	1	2,000	1	1	5,000	1	1	5,000	2	2	7,000	.23	.26	.19	
Psychiatric	1	1	1,000	2	1	10,000	2	2	2,009	4	4	\$18,000	6	6	14,692	77	71	215,616	76	70	305,382	168	155	566,699	19.56	20.16	15.29	
Respiratory system													8	6	23,000	8	6	23,000	15	13	51,906	23	19	74,906	2.68	2.47	2.02	
Skin and its appendages													1	1	2,500	1	1	2,500	4	4	26,000	5	5	28,500	.58	.65	.77	
Tuberculosis	1	1	3,170	1	1	2,000	2	2	8,000	2	2	2,214	7	5	24,000	112	96	433,038	251	221	1,216,911	376	328	1,689,333	43.77	42.66	45.57	
Tumors													2	2	5,000	2	2	5,000	6	6	30,000	8	8	35,000	.93	1.04	.94	
Veneral													1	1	4,000							1	1	4,000	.12	.13	.11	
Miscellaneous													7	7	52,000	7	7	52,000	16	16	91,257	23	23	146,257	2.68	2.99	3.94	
Total	3	3	5,170	4	3	15,000	5	5	20,009	6	6	20,214	28	26	103,258	287	256	1,107,744	526	470	2,435,545	859	769	3,706,940	100.00	100.00	100.00	

TABLE NO. 54.—*Converted insurance disability claims terminated during calendar year 1926 on account of death of insured, by class of disability*

Classification	Duration of disability claim															
	One-half year				1 year				2 years				3 years			
	Number	Lives	Amount of insurance	Commuted value at death	Number	Lives	Amount of insurance	Commuted value at death	Number	Lives	Amount of insurance	Commuted value at death	Number	Lives	Amount of insurance	Commuted value at death
Blood and blood-forming organs.....	1	1	\$1,000	\$970												
Circulatory system.....	3	3	7,500	7,442	3	3	\$20,000	\$19,012	1	1	\$10,000	\$9,273	3	3	\$25,000	\$22,073
Communicable and infectious diseases.....									1	1	2,000	1,811	1	1	10,000	8,926
Digestive system.....									1	1	10,000	9,426				
Endocrines.....	1	1	2,000	1,969												
Genito-urinary system.....					1	1	1,500	1,459	2	1	10,000	8,980				
Lymphatic system.....	1	1	7,000	6,871	1	1	2,000	1,904								
Nervous system.....	1	1	3,000	3,000	5	5	28,838	26,147								
Psychiatric diseases.....					2	2	11,000	10,417	1	1	1,000	927				
Respiratory system.....	1	1	997	958	2	1	4,000	3,892					4	4	14,000	12,464
Tuberculosis.....	12	12	39,000	38,138	46	42	187,500	179,845	22	21	91,000	83,415	4	3	8,009	7,007
Tumors.....	1	1	3,000	2,918	2	2	15,000	14,367	1	1	5,000	4,667	16	16	58,000	50,512
Miscellaneous.....													1	1	5,000	4,301
Total.....	21	21	63,497	62,266	62	57	269,838	257,043	29	27	129,000	118,499	29	28	120,009	105,283
													16	15	75,000	64,124

Blood and blood-forming organs												1	1	\$1,000	\$870	0.57	0.61	0.14	
Circulatory system	1	1	\$10,000	\$8,169								12	12	82,500	74,636	6.90	7.27	11.30	
Communicable and infectious diseases												3	3	13,000	11,584	1.72	1.82	1.78	
Digestive system												2	2	11,000	10,289	1.15	1.21	1.51	
Endocrines												1	1	2,000	1,969	.57	.61	.27	
Genito-urinary system												3	2	11,500	10,439	1.72	1.21	1.57	
Lymphatic system												2	2	9,000	8,775	1.15	1.21	1.23	
Nervous system	1	1	10,000	7,748								12	12	58,838	50,222	6.90	7.27	7.78	
Psychiatric diseases	1	1	5,000	4,077								8	7	25,009	22,428	4.60	4.24	3.43	
Respiratory system												3	2	4,997	4,850	1.72	1.21	.68	
Tuberculosis	11	11	40,000	32,495	2	2	\$7,000	\$5,518	1	1	\$1,000	\$743	122	116	485,550	443,550	70.13	70.30	66.48
Tumors												4	4	23,000	21,952	2.30	2.43	3.15	
Miscellaneous												1	1	5,000	4,301	.57	.61	.68	

TABLE No. 55.—*Converted insurance disability claims terminated during calendar year 1926 on account of recovery, classified by cause of disability*

Classification	Duration of disability															
	One-half year				1 year				2 years				3 years			
	Number	Lives	Amount of insurance	Com-muted value at recovery	Number	Lives	Amount of insurance	Com-muted value at recovery	Number	Lives	Amount of insurance	Com-muted value at recovery	Number	Lives	Amount of insurance	Com-muted value at recovery
Circulatory system.....																
Digestive system.....					1	1	\$5,000	\$4,834							1	\$10,000
Ear, nose, and throat.....									1	1	\$1,000	\$949				
Eye and annexa.....													1	1	\$2,000	\$1,785
Genito-urinary system.....																
Nervous system.....	2	1	\$10,000	\$9,757											1	10,000
Psychiatric.....					3	3	9,000	8,773	1	1	997	937	2	2	12,000	10,711
Tuberculosis.....					1	1	2,000	1,940	4	4	32,000	29,601	5	5	25,000	22,152
Venereal diseases.....									1	1	5,000	4,652	1	1	1,500	1,348
Miscellaneous.....													1	1	2,000	1,811
Total.....	2	1	10,000	9,757	5	5	16,000	15,547	7	7	38,997	36,139	10	10	42,500	37,807

Classification	Duration of disability								Total				Per cent of total		
	5 years				6 years										
	Number	Lives	Amount of insurance	Com-muted value at recovery	Number	Lives	Amount of insurance	Com-muted value at recovery	Number	Lives	Amount of insurance	Com-muted value at recovery	Number	Lives	Amount of insurance
Circulatory system.....	2	1	\$2,000	\$1,626	1	1	\$5,000	\$3,874	4	3	\$17,000	\$14,297	6.78	5.46	6.51
Digestive system.....									1	1	5,000	4,834	1.69	1.82	1.91
Ear, nose, and throat.....									1	1	1,000	949	1.69	1.82	.98
Eye and annexa.....									1	1	2,000	1,785	1.69	1.82	.77
Genito-urinary system.....									1	1	10,000	8,765	1.69	1.82	3.83
Nervous system.....									3	2	12,000	11,497	5.09	3.63	4.60

Psychiatric.....	1	1	1,000	810				8	8	32,997	29,963	13.56	14.55	12.54	
Tuberculosis.....	7	7	23,500	18,881	8	7	43,000	33,141	35	34	167,735	141,876	59.33	61.82	64.24
Veneral diseases.....									2	2	6,500	6,000	3.39	3.63	2.49
Miscellaneous.....									3	2	6,878	5,808	5.09	3.63	2.53
Total.....	10	9	26,500	21,317	9	8	48,000	37,015	59	55	261,110	225,774	100.00	100.00	100.00

TABLE NO. 56.—*Liability under yearly renewable term insurance claims; commuted value, June 30, 1927*

	Disability			Death after disability			Death			Total		
	Number of claims	Amount of insurance	Commuted value June 30, 1927	Number of claims	Amount of insurance	Commuted value June 30, 1927	Number of claims	Amount of insurance	Commuted value June 30, 1927	Number of claims	Amount of insurance	Commuted value June 30, 1927
Contract insurance claims:												
Year of award—												
1917.....	16	\$143,661	\$86,581				515	\$4,466,030	\$2,699,633	531	\$4,609,691	\$2,786,214
1918.....	2,883	24,709,190	15,773,979	417	\$3,303,243	\$2,198,387	110,510	946,118,596	606,597,846	113,810	974,136,038	624,570,212
1919.....	2,543	21,656,177	14,578,363	2,027	16,675,203	11,669,672	14,740	124,091,739	82,759,114	19,310	162,423,119	109,007,149
1920.....	1,215	9,946,995	7,173,135	3,511	27,506,056	20,182,472	3,053	23,405,205	16,802,101	7,779	61,258,256	44,157,708
1921.....	834	6,408,738	4,898,138	2,699	20,987,533	15,663,305	1,741	13,204,420	10,090,201	5,274	40,600,691	30,651,644
1922.....	1,030	7,555,392	6,097,375	2,009	14,766,407	11,358,202	1,272	9,937,325	8,011,812	4,311	32,259,124	25,467,389
1923.....	853	5,987,867	5,047,422	1,326	9,382,599	7,462,365	1,008	7,416,030	6,272,230	3,187	22,786,496	18,782,017
1924.....	884	5,586,349	4,930,609	913	6,036,961	4,917,375	1,004	7,067,319	6,262,537	2,801	18,680,629	16,110,521
1925.....	1,544	9,214,691	8,493,015	959	5,960,251	5,006,775	862	6,092,301	5,631,825	3,365	21,266,643	19,131,615
1926.....	953	5,672,317	5,410,742	640	3,922,943	3,348,166	558	4,069,480	3,603,471	2,151	13,664,740	12,662,379
1927.....	106	819,984	804,151	98	605,712	528,371	62	480,126	470,813	266	1,905,822	1,803,335
Total.....	12,861	97,700,770	73,293,510	14,599	109,551,908	82,335,060	135,325	1,146,348,571	749,501,583	162,785	1,353,601,249	905,130,183
Automatic insurance claims, total.....	299	1,298,856	785,590	169	639,085	443,763	7,430	32,265,232	19,853,273	7,898	34,203,173	21,082,626
Combined contract and automatic insurance claims, total.....	13,160	98,999,626	74,079,100	14,768	110,190,993	82,778,823	142,755	1,178,613,803	769,354,856	170,683	1,387,804,422	926,212,809

Suspended awards, total amount in suspension June 30, 1927.....

\$116,793

Total liability June 30, 1927.....

926,329,602

TABLE No. 57.—*Report of United States Government life insurance in force December 31, 1926*

TOTAL—ALL PLANS

	Number	Amount	Number	Amount
Insurance in force Dec. 31, 1925.....	396,843	\$1,563,588,221.75		
Issued during 1926.....	89,872	461,198,897.00		
Total.....			476,715	\$2,024,787,118.75
Terminations:				
Death claims awarded.....	1,415	6,109,108.46		
Disability claims awarded.....	652	2,967,125.88		
Matured endowments.....	1	10,000.00		
Surrendered for cash.....	3,984	13,150,720.18		
Surrendered for paid-up insurance.....	100	526,985.00		
Lapsed.....	10,214	39,126,782.00		
Dishonorable discharge.....	1	3,000.00		
Reduced.....	0	1,142,228.00		
Canceled.....	149	939,011.88		
Expired.....	5,128	11,933,453.00		
Change in data.....	3,854	17,471,618.10		
Total terminations.....	25,498	93,380,032.50		
Additions:				
Re-rated disability claims.....	60	230,426.00		
Paid-up insurance issued.....	100	100,313.43		
Revived.....	3,267	13,195,605.00		
Dishonorable discharges reinstated.....	3	14,000.00		
Continued under extended insurance.....	4,879	15,495,123.00		
Surrender for paid-up insurance canceled.....	1	3,000.00		
Change in data.....	3,999	17,513,898.77		
Total additions.....	12,309	46,552,366.20		
Net terminations.....			13,189	46,827,666.30
Insurance in force Dec. 31, 1926.....			463,526	1,977,959,452.45

TABLE No. 58.—*Report of United States Government life insurance in force December 31, 1926*

ORDINARY LIFE

	Number	Amount	Number	Amount
Insurance in force Dec. 31, 1925.....	70,191	\$360,805,623.17		
Issued during 1926.....	34,318	204,407,410.00		
Total.....			104,509	\$565,213,033.17
Terminations:				
Death claims awarded.....	399	2,216,122.00		
Disability claims awarded.....	267	1,524,303.00		
Surrendered for cash.....	391	1,699,500.00		
Surrendered for paid-up insurance.....	25	139,000.00		
Lapsed.....	2,836	13,594,627.00		
Reduced.....	0	480,000.00		
Canceled.....	88	663,868.88		
Change in data.....	1,117	5,966,462.00		
Total terminations.....	5,120	26,283,282.88		
Additions:				
Re-rated disability claims.....	28	141,961.00		
Paid-up insurance issued.....	25	19,971.16		
Revived.....	734	3,702,500.00		
Surrender for paid-up insurance canceled.....	1	3,000.00		
Change in data.....	1,402	7,372,755.00		
Total additions.....	2,190	11,240,187.16		
Net terminations.....			2,930	15,043,095.72
Insurance in force Dec. 31, 1926.....			101,579	550,169,937.45

TABLE NO. 59.—*Report of United States Government life insurance in force December 31, 1926*

20-PAYMENT LIFE

	Number	Amount	Number	Amount
Insurance in force Dec. 31, 1925.....	124, 731	\$541, 184, 777. 57	146, 770	\$647, 609, 120. 57
Issued during 1926.....	22, 039	106, 424, 843. 00		
Total.....				
Terminations:				
Death claims awarded.....	344	1, 579, 894. 00		
Disability claims awarded.....	119	582, 775. 48		
Surrendered for cash.....	666	2, 522, 500. 00		
Surrendered for paid-up insurance.....	33	175, 000. 00		
Lapsed.....	3, 019	11, 785, 698. 00		
Reduced.....	0	240, 228. 00		
Canceled.....	10	70, 000. 00		
Change in data.....	897	4, 028, 914. 00		
Total terminations.....	5, 088	20, 985, 009. 48	3, 039	12, 418, 937. 50
Additions:				
Rerated disability claims.....	12	32, 424. 00		
Paid-up insurance issued.....	33	36, 722. 98		
Revived.....	1, 080	4, 622, 089. 00		
Change in data.....	924	3, 874, 836. 00		
Total additions.....	2, 049	8, 566, 071. 98	143, 731	635, 190, 183. 07
Net terminations.....				
Insurance in force Dec. 31, 1926.....				

TABLE NO. 60.—*Report of United States Government life insurance in force December 31, 1926*

30-PAYMENT LIFE

	Number	Amount	Number	Amount
Insurance in force Dec. 31, 1925.....	18, 842	\$96, 211, 312. 93	24, 104	\$126, 102, 828. 93
Issued during 1926.....	5, 262	28, 891, 511. 00		
Total.....				
Terminations:				
Death claims awarded.....	46	235, 326. 00		
Disability claims awarded.....	24	105, 296. 00		
Surrendered for cash.....	116	528, 000. 00		
Surrendered for paid-up insurance.....	4	29, 000. 00		
Lapsed.....	477	2, 228, 000. 00		
Reduced.....	0	63, 000. 00		
Canceled.....	1	17, 000. 00		
Change in data.....	215	1, 012, 241. 00		
Total terminations.....	883	4, 209, 863. 00	461	2, 237, 617. 23
Additions:				
Rerated disability claims.....	1	4, 479. 00		
Paid-up insurance issued.....	4	4, 903. 77		
Revived.....	159	721, 500. 00		
Change in data.....	258	1, 241, 868. 00		
Total additions.....	422	1, 972, 245. 77	23, 643	122, 865, 206. 70
Net terminations.....				
Insurance in force Dec. 31, 1926.....				

TABLE NO. 61.—*Report of United States Government Life Insurance in force December 31, 1926*

20-YEAR ENDOWMENT

	Number	Amount	Number	Amount
Insurance in force Dec. 31, 1925.....	106,423	\$303,412,378.74		
Issued during 1926.....	15,425	64,940,444.00		
Total.....			121,858	\$368,358,822.74
Terminations:				
Death claims awarded.....	390	1,214,041.41		
Disability claims awarded.....	142	894,896.56		
Surrendered for cash.....	1,876	5,325,092.18		
Surrendered for paid-up insurance.....	22	106,486.00		
Lapsed.....	2,800	7,066,967.00		
Dishonorable discharge.....	1	3,000.00		
Reduced.....	0	220,500.00		
Canceled.....	30	111,500.00		
Change in data.....	847	3,228,197.10		
Total terminations.....	6,108	17,663,680.25		
Additions:				
Rated disability claims.....	15	39,370.00		
Paid-up insurance issued.....	22	24,771.49		
Revived.....	915	2,504,916.00		
Dishonorable discharges reinstated.....	3	4,000.00		
Change in data.....	627	2,055,023.77		
Total additions.....	1,582	4,638,081.26		
Net terminations.....			4,526	13,025,598.99
Insurance in force Dec. 31, 1926.....			117,332	345,333,223.75

TABLE NO. 62.—*Report of United States Government Life Insurance in force December 31, 1926*

30-YEAR ENDOWMENT

	Number	Amount	Number	Amount
Insurance in force Dec. 31, 1925.....	26,929	\$111,746,389.28		
Issued during 1926.....	4,731	22,996,276.00		
Total.....			31,660	\$134,742,665.28
Terminations:				
Death claims awarded.....	69	274,219.00		
Disability claims awarded.....	24	111,001.00		
Surrendered for cash.....	213	850,500.00		
Surrendered for paid-up insurance.....	7	30,500.00		
Lapsed.....	586	2,221,490.00		
Reduced.....	0	63,000.00		
Canceled.....	1	7,500.00		
Change in data.....	243	1,167,000.00		
Total terminations.....	1,143	4,725,210.00		
Additions:				
Rated disability claims.....	2	8,205.00		
Paid-up insurance issued.....	7	6,183.80		
Revived.....	189	751,500.00		
Change in data.....	214	893,274.00		
Total additions.....	412	1,659,162.80		
Net terminations.....			731	3,066,047.20
Net insurance in force Dec. 31, 1926.....			30,929	131,676,618.08

TABLE No. 63.—*Report of United States Government life insurance in force December 31, 1926*

ENDOWMENT AT AGE 62

	Number	Amount	Number	Amount
Insurance in force Dec. 31, 1925.....	22,646	\$110,844,017.06	28,761	\$141,613,742.06
Issued during 1926.....	6,115	30,769,725.00		
Total.....				
Terminations:				
Death claims awarded.....	66	349,092.34		
Disability claims awarded.....	36	173,841.00		
Matured endowments.....	1	10,000.00		
Surrendered for cash.....	136	583,000.00		
Surrendered for paid-up insurance.....	9	47,000.00		
Lapsed.....	493	2,220,600.00		
Reduced.....		75,500.00		
Canceled.....	10	51,000.00		
Change in data.....	214	1,143,711.00		
Total terminations.....	965	4,653,744.34	534	2,593,836.11
Additions:				
Rated disability claims.....	2	3,987.00		
Paid-up insurance issued.....	9	7,760.23		
Revived.....	190	893,100.00		
Change in data.....	230	1,155,061.00		
Total additions.....	431	2,059,908.23	28,227	139,019,905.95
Net terminations.....				
Insurance in force Dec. 31, 1926.....				

TABLE No. 64.—*Report of United States Government life insurance in force December 31, 1926*

FIVE-YEAR CONVERTIBLE TERM

	Number	Amount	Number	Amount
Insurance in force Dec. 31, 1925.....			1,962	\$12,763,188.00
Issued during 1926.....	1,982	\$12,763,188.00		
Total.....				
Terminations:				
Death claims awarded.....				
Disability claims awarded.....				
Surrendered for cash.....				
Lapsed.....	3	25,000.00		
Reduced.....				
Canceled.....	1	5,000.00		
Change in data.....	14	104,000.00		
Total terminations.....	18	134,000.00	6	43,000.00
Additions:				
Rated disability claims.....				
Revived.....				
Change in data.....	12	91,000.00		
Total additions.....	12	91,000.00	1,976	12,720,188.00
Net terminations.....				
Insurance in force Dec. 31, 1926.....				

TABLE No. 65.—*Report of United States Government life insurance in force December 31, 1926*

EXTENDED INSURANCE

	Number	Amount	Number	Amount
Insurance in force Dec. 31, 1925.....	17,071	\$39,383,723.00		
Issued during 1926.....	7,712	26,569,728.00		
Total.....			24,783	\$65,953,451.00
Terminations:				
Death claims awarded.....	104	240,413.71		
Disability claims awarded.....	40	75,012.84		
Surrendered for cash.....	586	1,642,127.00		
Revived.....	2,639	9,883,797.00		
Reduced.....				
Canceled.....	8	13,143.00		
Expired.....	5,322	13,124,261.00		
Change in data.....	307	821,093.00		
Total terminations.....	9,006	25,799,847.55		
Additions:				
Re-rated disability claims.....				
Change in data.....	332	830,586.00		
Total additions.....	332	830,586.00		
Net terminations.....			8,674	24,969,261.55
Insurance in force Dec. 31, 1926.....			16,109	40,984,189.45

TABLE NO. 66.—Policy loans United States Government life-insurance fund

Month	Loans outstanding at beginning of month	New loans issued during month	Repayments						Net increase for month	Loans outstanding at end of month	
			By deduction from—								
			By cash	Loans	Surrenders	Claims	Dividend deposits and payments	Total repayments			
1926											
July	\$17,840,620.03	\$1,399,791.72	\$105,195.45	\$668,852.69	\$75,466.87	\$3,927.06	\$54.73	\$853,496.80	\$546,294.92	\$18,386,914.95	
August	18,386,914.95	1,452,022.83	96,283.21	731,700.54	144,892.71	5,346.01	62.86	978,285.33	473,737.50	18,860,652.45	
September	18,860,652.45	1,497,039.87	89,428.77	726,850.94	109,802.41	9,334.11	145.44	935,561.67	561,478.20	19,422,130.65	
October	19,422,130.65	1,519,408.22	91,310.16	763,134.95	123,346.12	4,339.96	128.02	982,259.21	537,149.01	19,959,279.66	
November	19,959,279.66	1,370,753.74	96,485.22	730,398.13	132,045.72	6,731.09	112.85	965,773.01	404,980.73	20,364,260.39	
December	20,364,260.39	1,580,607.12	92,713.98	830,813.43	82,472.61	3,941.61	194.48	1,010,136.11	570,471.01	20,934,731.40	
1927											
January	20,934,731.40	1,558,411.90	126,289.65	798,453.68	131,365.49	4,668.54	52.83	1,060,830.19	497,581.71	21,432,313.11	
February	21,432,313.11	1,580,099.15	112,576.16	805,297.46	135,514.99	4,668.35	18.91	1,058,075.87	522,023.28	21,954,336.39	
March	21,954,336.39	1,980,849.93	131,665.46	937,656.98	144,853.20	6,591.85	293.04	1,221,060.53	759,789.40	22,714,125.79	
April	22,714,125.79	1,730,394.25	123,365.80	840,984.40	120,440.21	3,398.07	277.04	1,088,465.52	641,928.73	23,356,054.52	
May	23,356,054.52	1,797,347.90	112,090.99	936,979.88	125,828.53	11,767.19	170.31	1,186,836.90	610,511.00	23,966,565.52	
June	23,966,565.52	1,794,927.09	105,657.75	921,853.55	112,281.44	8,267.27	193.37	1,148,253.38	646,673.71	24,613,239.23	
Total		19,261,653.72	1,283,062.60	9,692,976.63	1,438,310.30	72,981.11	1,703.88	12,489,034.52	6,772,619.20		

SUMMARY FOR FISCAL YEAR 1927

Total amount of policy loans issued to date.....	\$57,187,743.30
Outstanding policy loans on July 1, 1926.....	17,840,620.03
New loans issued during fiscal year.....	\$19,261,653.72
Less:	
Repayments in cash.....	\$1,283,062.60
Repayments by deduction—	
(a) From new loans.....	\$9,692,976.63
(b) From surrenders.....	1,438,310.30
(c) From claims.....	72,981.11
(d) From dividend deposits and dividend payments.....	1,703.88
Total collections by deduction.....	11,205,971.92
Total repayments.....	12,489,034.52
Net increase in outstanding loans.....	6,772,619.20
Outstanding policy loans June 30, 1927.....	24,613,239.23

TABLE NO. 67.—Financial statement of the United States Government life-insurance fund by calendar years, from origin of fund to December 31, 1926

	From origin to Dec. 31, 1920	1921	1922	1923	1924	1925	1926
Ledger assets, Dec. 31.....	\$0.00	\$20,227,973.36	\$43,926,875.50	\$71,428,561.66	\$103,731,836.63	\$137,564,186.64	\$178,294,158.80
INCOME							
Premiums.....	20,534,893.50	24,971,186.25	28,964,134.47	33,594,279.66	38,775,206.74	40,978,147.23	49,544,202.37
Interest.....	561,649.71	1,591,428.28	2,661,703.80	3,883,296.25	5,154,961.72	6,008,550.65	8,498,358.76
Increase by amortization of bonds.....	37,543.55	127,514.88	172,829.40	182,562.67	191,980.54	194,162.21	203,237.45
Dividends deposited by policyholders.....	0.00	1,839.46	4,925.99	9,908.23	18,960.70	26,440.34	33,790.04
Received from United States on account of the extra hazards of military and naval service.....	0.00	2,257,923.97	3,362,019.92	3,196,628.93	2,355,102.20	4,343,604.07	4,342,278.66
Consideration for supplementary installment contracts under claims.....	0.00	0.00	0.00	6,442,498.55	2,386,853.50	3,316,978.84	3,971,672.63
Other income.....	668.00	21,978.58	24,401.51	47,192.41	96,673.27	79,776.96	89,154.48
Total income.....	21,134,745.45	28,971,871.42	35,192,015.09	47,356,356.70	46,979,748.67	55,552,660.27	66,682,694.39
Total.....	21,134,745.45	49,199,844.78	79,118,890.59	118,784,918.36	150,711,585.30	193,116,846.91	244,976,853.19
DISBURSEMENTS							
Claims (death and total permanent disability).....	492,994.58	2,982,580.45	3,913,414.07	9,494,042.19	6,201,436.22	7,380,917.72	8,968,967.04
Surrender values.....	43,274.88	711,167.93	1,595,221.36	1,898,456.07	2,583,236.82	2,733,629.50	3,303,056.13
Accrued interest on bonds purchased.....	237,909.72	290,020.81	250,737.23	272,326.85	306,406.60	357,693.75	430,557.63
Premiums refunded, disapproved applications, and premiums paid in advance.....	55,481.04	213,926.14	164,041.61	209,369.87	196,054.69	154,335.91	214,897.25
Dividends paid policyholders.....	0.00	993,706.92	1,631,103.46	2,058,615.97	2,587,932.85	2,798,258.96	3,088,667.61
Paid on supplementary installment contracts under claims.....	0.00	0.00	0.00	1,107,999.58	1,196,648.58	1,337,504.08	1,556,296.20
Other disbursements.....	72,221.87	81,647.03	135,811.20	12,271.20	75,683.00	90,298.20	222,241.61
Total disbursements.....	906,772.09	5,272,969.28	7,690,328.93	15,053,081.73	13,147,398.66	14,822,688.11	17,784,685.57
Balance.....	20,227,973.36	43,926,875.50	71,428,561.66	103,731,836.63	137,564,186.64	178,294,158.80	227,192,167.62
ASSETS							
Ledger assets							
Book value of bonds, amortized.....	19,904,051.36	42,182,264.87	67,978,169.09	96,885,767.06	127,147,236.13	161,274,835.84	204,563,400.22
Policy loans.....	58,906.44	751,788.11	2,677,931.40	5,721,787.68	9,875,242.64	14,849,466.11	20,934,731.40
Cash on hand and in U. S. Treasury.....	265,015.56	992,822.52	772,461.17	1,124,281.89	541,707.87	2,169,856.85	1,694,036.00
Total ledger assets as per "Balance" under income and disbursements.....	20,227,973.36	43,926,875.50	71,428,561.66	103,731,836.63	137,564,186.64	178,294,158.80	227,192,167.62

Nonledger assets							
Interest accrued on bonds and policy loans.....	176, 736. 29	355, 431. 41	602, 424. 57	938, 815. 32	1, 532, 230. 07	2, 435, 017. 51	3, 555, 810. 99
Premiums due (grace period).....	114, 157. 24	123, 978. 49	207, 142. 47	233, 281. 58	90, 355. 82	202, 328. 90	382, 298. 85
Premiums in course of collection through Government depart- ments.....	252, 476. 76	376, 049. 67	333, 929. 20	275, 813. 09	278, 238. 04	150, 769. 14	406, 889. 64
Due from United States on account of extra hazards of military and naval service.....	.00	703, 070. 50	570, 526. 39	57, 660. 98	724, 472. 28	320, 182. 28	221, 441. 62
Policy liens.....	.00	29, 956. 55	31, 018. 73	17, 495. 63	21, 782. 56	25, 368. 80	35, 168. 26
Total nonledger assets.....	543, 370. 29	1, 588, 486. 62	1, 745, 041. 36	1, 523, 066. 60	2, 647, 078. 77	3, 133, 666. 63	4, 601, 609. 36
Total assets.....	20, 771, 343. 65	45, 515, 362. 12	73, 173, 603. 02	105, 254, 903. 23	140, 211, 265. 41	181, 427, 825. 43	231, 793, 777. 00
LIABILITIES							
Reserves.....	13, 804, 215. 27	33, 392, 635. 84	58, 459, 958. 89	88, 237, 459. 94	120, 608, 656. 68	158, 322, 309. 00	203, 501, 689. 00
Present value of future installments on claims.....	564, 883. 54	2, 133, 487. 00	3, 439, 764. 30	5, 086, 789. 21	6, 563, 408. 16	8, 908, 167. 00	11, 590, 627. 65
Claims in process of settlement.....	1, 496, 975. 73	1, 822, 689. 00	2, 106, 323. 17	1, 156, 107. 00	1, 033, 567. 80	1, 250, 551. 07	1, 653, 713. 82
Premiums paid in advance.....	3, 210, 669. 56	3, 949, 351. 90	4, 462, 531. 96	5, 089, 227. 74	5, 955, 875. 36	6, 384, 818. 88	7, 041, 466. 03
Dividends deposited with interest.....	.00	1, 905. 16	6, 867. 88	17, 323. 67	35, 219. 43	57, 858. 82	88, 867. 56
Advance payments from War Department.....	.00	339, 518. 51	323, 252. 52	253, 428. 40	254, 111. 12	132, 477. 54	362, 009. 73
Apportioned for payment of dividends.....	1, 030, 016. 69	1, 750, 000. 00	2, 357, 000. 00	2, 759, 732. 00	2, 950, 000. 00	3, 300, 000. 00	4, 200, 000. 00
Other liabilities.....	404, 402. 00	436, 275. 31	200, 162. 15	142, 478. 82	111, 175. 28	132, 484. 07	196, 331. 63
Unassigned funds.....	258, 180. 86	1, 689, 499. 40	1, 817, 742. 15	2, 512, 356. 45	2, 699, 251. 58	2, 939, 159. 05	3, 159, 071. 58
Total liabilities.....	20, 771, 343. 65	45, 515, 362. 12	73, 173, 603. 02	105, 254, 903. 23	140, 211, 265. 41	181, 427, 825. 43	231, 793, 777. 00

TABLE NO. 68.—Bond investments of United States Government life-insurance fund as of June 30, 1927

Description	First Liberty loan bonds, 4½ per cent	Fourth Lib- erty loan bonds, 4½ per cent	1952 Treasury, 4½ per cent	Farm-loan bonds, 4½ per cent	Farm-loan bonds, 4½ per cent	Grand total
Par value.....	\$6, 639, 900. 00	\$52, 103, 650. 00	\$49, 173, 200. 00	\$69, 200, 000. 00	\$32, 550, 000. 00	\$209, 666, 750. 00
Purchase price.....	6, 316, 209. 21	50, 536, 956. 58	49, 201, 905. 28	69, 742, 644. 40	32, 477, 590. 04	208, 276, 305. 51
Market value.....	6, 835, 113. 06	53, 989, 802. 13	55, 624, 723. 84	70, 283, 062. 50	32, 766, 000. 00	219, 498, 701. 53
Book value.....	6, 358, 730. 18	51, 101, 013. 96	49, 201, 707. 06	69, 728, 361. 84	32, 478, 405. 62	208, 868, 218. 66
Annual interest.....	282, 195. 76	2, 214, 405. 13	2, 089, 861. 00	3, 114, 000. 00	1, 383, 375. 00	9, 083, 836. 88
Interest accrued to date not paid.....	11, 758. 16	461, 334. 40	435, 387. 71	1, 557, 000. 00	691, 687. 50	3, 157, 167. 77

Average effective rate (all holdings), 4.36.

Average price paid per \$100 (all holdings), 99.34.

TABLE NO. 69.—Number of applications for adjusted compensation, received by fiscal years, from September, 1924, to June 30, 1927

Fiscal year	Applications received
1925.....	2,845,180
1926.....	897,008
1927.....	189,316
Total.....	3,425,504

TABLE NO. 70.—Action taken on applications for adjusted compensation, fiscal year 1927

Branch of service	Claim	Number	Amount
Army.....	Cash:		
	(a) Veterans.....	6,275	\$488,626.25
	(b) Dependents.....	606	19,328.75
	Dependents (over \$50).....	12,463	4,426,562.18
	Certificates.....	155,847	146,131,845.00
	Total.....	175,283	151,065,802.18
Navy.....	Cash:		
	(a) Veterans.....	650	16,386.25
	(b) Dependents.....	57	1,586.50
	Dependents (over \$50).....	1,291	533,982.45
	Certificates.....	26,535	26,643,674.00
	Total.....	28,533	27,195,906.20
Marine Corps.....	Cash:		
	(a) Veterans.....	16	505.00
	(b) Dependents.....	11	261.75
	Dependents (over \$50).....	301	124,265.21
	Certificates.....	2,889	2,945,282.00
	Total.....	3,217	3,070,313.96
	Grand total.....	207,033	181,333,022.31

TABLE NO. 71.—Death claims awarded on account of adjusted service certificates, arranged by beneficiary, as of June 30, 1927

Beneficiary	Deaths		Payments to dependents over \$50		Payments to dependents \$50 or less		\$50 bonus		Total	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Parent or parents and others.....	1	\$940							1	\$940
Estate.....	1,656	1,732,422							1,656	1,732,422
Wife or husband.....	16,099	16,529,590	21,717	28,264,919	1,157	\$34,961	799	\$47,940	39,802	24,579,410
Child.....	696	696,488	5,561	1,343,792	223	6,433	571	34,260	5,150	2,080,973
Mother.....	7,345	7,410,819	40,323	14,416,625	2,317	62,824	5,498	220,880	55,433	22,219,148
Father.....	1,330	1,580,816	5,335	2,103,823	844	9,226	919	55,140	8,628	3,749,007
Other relatives.....	4,827	5,065,148	818	124,040	14	361	45	2,700	5,304	5,192,239
No relative, orphanage, hospital, etc.....	669	703,970	8	3,000					674	706,970
No relationship shown.....	14	12,820							14	12,820
	482	491,807							482	491,807
Total.....	33,419	34,224,720	71,859	26,257,199	4,664	113,797	7,832	469,920	117,194	61,945,636

CENTRAL BOARD OF APPEALS

TABLE No. 72.—*Appeal cases disposed of by sections of central board of appeals and appeal group on central office cases for fiscal year 1927*

Reasons for cases appealed	Section B			Section C			Section D			Section E			Total for central board of appeals			Appeal group on central-office cases			Grand total		
	Al- lowed	Dis- al- lowed	To- tal	Al- lowed	Dis- al- lowed	To- tal	Al- lowed	Dis- al- lowed	To- tal	Al- lowed	Dis- al- lowed	To- tal	Al- lowed	Dis- al- lowed	To- tal	Al- lowed	Dis- al- lowed	To- tal	Al- lowed	Dis- al- lowed	To- tal
Increased rating.....	127	534	661	31	250	281	139	444	583	37	170	207	334	1,398	1,732	17	37	54	351	1,435	1,786
Service connection.....	64	349	413	27	376	403	107	507	614	57	239	296	255	1,471	1,726	67	253	320	322	1,724	2,046
Permanent total rating.....	13	17	30	11	23	34	11	35	46	21	70	91	56	145	201	69	123	192	125	268	393
Retroactive rating.....	30	85	115	4	33	37	17	64	81	40	126	166	91	308	399	124	177	301	215	485	700
Further training.....	2	39	41	3	8	11	1	19	20	5	22	27	11	88	99	1	-----	1	12	88	100
Reimbursement for unauthorized medical treatment.....	1	8	9	-----	-----	-----	1	11	12	-----	6	6	2	25	27	-----	-----	-----	2	25	27
Hospital and medical treatment.....	4	-----	4	-----	-----	-----	-----	-----	-----	-----	1	1	4	1	5	-----	-----	-----	4	1	5
Compensation for dependency allowance.....	1	3	4	1	5	6	2	10	12	-----	-----	-----	4	18	22	-----	-----	-----	4	18	22
Change of occupational variant.....	3	3	6	-----	-----	-----	-----	-----	-----	1	2	2	4	5	11	-----	-----	-----	6	5	11
Rating for insurance purposes.....	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	2	2	-----	2	2	119	470	539	119	472	591
Rating, arrested tuberculosis.....	4	-----	4	-----	-----	-----	-----	-----	-----	-----	-----	-----	4	-----	4	1	-----	1	5	-----	5
Question of competency.....	-----	-----	-----	-----	-----	-----	-----	-----	-----	1	1	2	1	1	2	-----	2	2	1	3	4
Referred under section 23, World War veterans' act, 1924.....	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	2	2	-----	2	2
Total.....	249	1,038	1,287	77	695	772	279	1,090	1,369	163	639	802	768	3,462	4,230	398	1,064	1,462	1,166	4,526	5,692
Per cent.....	19.3	80.7	100.0	10.0	90.0	100.0	20.4	79.6	100.0	20.3	79.7	100.0	18.2	81.8	100.0	27.2	72.8	100.0	20.5	79.5	100.0
Service connection, regulation No. 74.....	109	148	257	98	88	184	177	117	294	240	211	451	624	562	1,186	-----	-----	1	625	562	1,187
Direct service connection for tuberculosis.....	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	28	410	438	28	410	438
Total decisions.....	358	1,186	1,544	175	781	956	456	1,207	1,663	403	850	1,253	1,392	4,024	5,416	427	1,474	1,901	1,819	5,498	7,317
Bureau-employee cases handled.....	-----	-----	661	-----	-----	275	-----	-----	282	-----	-----	427	-----	-----	1,645	-----	-----	-----	-----	-----	1,645
Cases returned without action.....	-----	-----	375	-----	-----	31	-----	-----	197	-----	-----	58	-----	-----	661	-----	-----	63	-----	-----	724
Action other than decisions.....	-----	-----	30	-----	-----	137	-----	-----	170	-----	-----	125	-----	-----	462	-----	-----	516	-----	-----	978
Total cases released.....	-----	-----	2,610	-----	-----	1,399	-----	-----	2,312	-----	-----	1,863	-----	-----	8,184	-----	-----	2,480	-----	-----	10,664

FINANCE TABLES

TABLE No. 73.—Appropriations versus disbursement to June 30, 1927

Purpose	Receipts			Disbursements		Covered into Treasury	Balance
	Appropriations	Other than appropriations	Total	Fiscal year	Total		
Salaries and expenses, 1918.....	\$3,387,800.00		\$3,387,800.00		\$3,316,993.93	\$70,806.07	
Salaries and expenses, 1919.....	16,468,500.00		16,468,500.00	1 86.44	15,842,397.42	626,102.58	
Salaries and expenses, 1920.....	15,862,806.80		15,862,806.00	1 12.63	15,343,429.66	519,376.34	
Salaries and expenses, 1921.....	10,324,400.00		10,324,400.00	1 5.97	9,241,630.88	1,082,869.12	
Salaries and expenses, 1922.....	7,400,400.00		7,400,400.00		6,181,807.41	1,188,780.67	\$29,832.82
Salaries and expenses, 1923.....	34,970,974.65	\$1,086.52	34,972,061.17	1 15,770.15	33,785,293.64	1,186,767.53	
Salaries and expenses, 1924.....	49,984,063.00	8,505.80	49,992,568.80	1 232,772.25	42,661,970.96	6,979,438.78	351,159.05
Salaries and expenses, 1925.....	48,015,000.00		48,015,000.00	1 50,526.42	44,980,260.01	3,034,739.99	3,497,890.97
Salaries and expenses, 1926.....	45,500,000.00		45,500,000.00		42,002,069.03	3,497,930.97	7,900,011.43
Salaries and expenses, 1927.....	44,000,000.00		44,000,000.00	36,099,988.57	36,099,988.57		15,000.00
Printing and binding, 1924.....	300,000.00		300,000.00		140,408.45	144,591.52	111,441.19
Printing and binding, 1925.....	275,000.00		275,000.00	139.50	163,558.81		85,333.25
Printing and binding, 1926.....	200,000.00		200,000.00	16,993.49	114,666.65		54,948.31
Printing and binding, 1927.....	165,000.00		165,000.00	110,051.48	110,051.48		
Administrative expenses, adjusted compensation, 1924-25.....	1,188,500.00		1,188,500.00	8.13	835,069.73		353,430.27
Adjusted service and dependent pay.....	38,629,398.00		38,629,398.00	9,950,630.34	18,624,280.45		20,005,117.55
Adjusted service certificate fund.....	336,000,000.00	11,565,172.56	347,565,172.56	14,407,783.32	34,360,710.98		313,195,461.63
Increase of compensation, 1920.....	1,515,000.00		1,515,000.00		1,286,697.81	228,302.19	
Increase of compensation, 1921.....	780,000.00		780,000.00		726,779.89	53,220.11	
Increase of compensation, 1922.....	2,922,024.08		2,922,024.08	1 20.00	2,044,679.26	878,344.74	
Increase of compensation, 1923.....	4,013,480.00		4,013,480.00		2,730,494.56	1,279,189.90	3,795.84
Increase of compensation, 1924.....	3,353,280.00		3,353,280.00		1,909,876.29	1,415,320.14	28,083.57
Vocational rehabilitation.....	8,000,000.00	28.30	8,000,028.30	81.93	7,998,711.86		1,316.45
Vocational rehabilitation, 1920.....	31,000,000.00		31,000,000.00	1 422.09	30,986,427.83	63,572.17	
Vocational rehabilitation, 1921.....	105,000,000.00		105,000,000.00	1 2,786.42	102,399,334.62	2,600,665.38	
Vocational rehabilitation, 1922.....	178,214,182.00	654.27	178,214,836.27	1 10,618.45	165,775,862.01	12,438,974.26	
Vocational rehabilitation, 1923.....	148,209,188.80	58,434.63	148,267,623.43	1 894.71	147,760,263.68		517,369.75
Vocational rehabilitation, 1924.....	120,743,000.00	786,177.42	121,529,177.42	17,756.18	103,930,234.85	16,136,823.06	1,462,119.51
Vocational rehabilitation, 1925.....	89,000,000.00		89,000,000.00	9,634.22	58,994,075.01		30,005,924.99
Vocational rehabilitation, 1926.....	27,000,000.00		27,000,000.00	95,693.22	24,804,693.95		2,195,306.05
Vocational rehabilitation, 1926-July 2, 1928.....	11,000,000.00		11,000,000.00	2,095,022.71	2,095,022.71		8,904,977.29
Vocational rehabilitation revolving fund.....	500,000.00		500,000.00		12,085.78		487,914.22
Vocational rehabilitation special fund.....		78,144.50	78,144.50		78,060.96		83.53
Medical and hospital services, 1921.....	54,710,272.00		54,710,272.00	1 6,265.86	54,268,429.26	441,842.74	6,781.73
Medical and hospital services, 1922.....	78,278,930.00		78,278,930.00	1 20,427.04	68,794,645.57	9,484,284.43	
Medical and hospital services, 1923.....	64,658,680.00	44,709.99	64,703,389.99	1 7,311.58	46,482,594.12	18,220,795.87	
Medical and hospital services, 1924.....	45,883,710.00	852,786.13	46,736,496.13	1 217,464.21	29,187,374.04	16,775,888.51	773,233.56

Medical and hospital services, 1925.....	43,980,515.59	-----	43,980,515.59	92,576.65	33,968,709.52	-----	10,011,806.07
Medical and hospital services, 1926.....	35,819,484.41	-----	35,819,484.41	6,437,835.32	33,123,554.58	-----	2,695,929.83
Medical and hospital services, 1927.....	35,000,000.00	-----	35,000,000.00	25,276,035.90	25,276,035.90	-----	9,723,964.10
Hospital facilities and services.....	22,000,000.00	-----	22,000,000.00	655,631.22	17,279,123.36	-----	4,720,876.64
Hospital facilities and services, 1924-1926.....	3,850,000.00	-----	3,850,000.00	633,994.28	3,673,187.41	-----	176,812.59
Hospital facilities and services, 1926-27.....	8,000,000.00	-----	8,000,000.00	3,309,632.34	4,828,600.41	-----	3,171,399.59
Soldiers' and sailors' civil relief claims, 1923.....	25,000.00	-----	25,000.00	110.64	19,383.65	5,616.35	-----
Compensation.....	675,600,000.00	-----	675,600,000.00	19,525.31	674,862,149.14	694,837.36	43,013.50
Compensation 1925 and prior years.....	65,230,000.00	-----	65,230,000.00	32,746.23	65,142,767.84	-----	87,232.16
Compensation 1926 and prior years.....	156,020,000.00	-----	156,020,000.00	199,100.12	154,288,588.07	-----	1,731,411.93
Compensation 1927 and prior years.....	140,800,000.00	-----	140,800,000.00	140,593,678.16	140,593,678.16	-----	206,321.84
Compensation 1928 and prior years.....	168,500,000.00	-----	168,500,000.00	33,134,658.89	33,134,658.89	-----	135,365,341.11
Military and naval insurance.....	23,000,000.00	450,175,966.08	473,175,966.08	793,679.81	463,859,581.99	-----	9,316,384.09
Military and naval insurance, 1923.....	13,235,000.00	-----	13,235,000.00	131.72	13,234,667.04	332.96	-----
Military and naval insurance, 1924.....	90,000,000.00	-----	90,000,000.00	329.64	89,960,322.64	684.25	8,993.11
Military and naval insurance, 1925.....	88,000,000.00	-----	88,000,000.00	6,204.41	87,960,628.84	-----	39,371.16
Military and naval insurance, 1926.....	125,000,000.00	-----	125,000,000.00	104,904.59	116,074,433.38	-----	8,925,566.62
Military and naval insurance, 1927.....	123,000,000.00	-----	123,000,000.00	120,072,080.18	120,072,080.18	-----	2,927,919.32
United States Government life insurance.....	-----	310,258,214.44	310,258,214.44	11,864,371.29	53,080,177.59	-----	257,178,036.35
Allotment trust fund.....	-----	320,526,000.00	320,526,000.00	100,418.70	300,880,197.46	-----	19,645,802.54
Military and naval family allowance.....	298,615,000.00	-----	298,615,000.00	87,218.82	282,108,281.74	15,900,000.00	606,718.26
Marine and seaman's insurance.....	50,000,000.00	53,148,319.94	103,148,319.94	-----	35,074,818.69	67,000,000.00	1,073,501.25
Claims for damages, act Dec. 28, 1922, Veterans' Bureau.....	2,623.66	-----	2,623.66	1,064.45	2,623.66	-----	-----
Payments to Edith W. Peacock, treasurer Peacock Military College.....	12,000.00	-----	12,000.00	-----	12,000.00	-----	-----
Relief of John T. Wilson.....	12,153.00	-----	12,153.00	-----	12,153.00	-----	-----
Judgments, Court of Claims.....	11,387.72	-----	11,387.72	11,387.72	11,387.72	-----	-----
Relief of Immaculato Carlino, widow of Alexander Carlino.....	5,000.00	-----	5,000.00	5,000.00	5,000.00	-----	-----
Relief of Albert Hosley.....	4,000.00	-----	4,000.00	4,000.00	4,000.00	-----	-----
Total.....	3,793,176,752.83	1,147,504,200.58	4,940,680,953.41	405,348,447.70	3,904,592,602.56	175,410,614.43	860,677,736.42

1 Credit,

TABLE NO. 74.—*Analysis of obligations from all appropriations, fiscal year 1927*

Classification	Total
Personal services:	
Salaries.....	\$36,405,921.29
Special and miscellaneous payments.....	11,242,299.11
Supplies and materials:	
Stationery and office supplies.....	458,977.37
Medical and hospital supplies.....	1,294,860.67
Scientific and educational supplies.....	52,910.37
Fuel.....	722,659.32
Wearing apparel and sewing supplies.....	45,841.47
Forage.....	79,550.28
Provisions.....	7,654,863.65
Sundry supplies.....	293,604.12
Communication service:	
Telegraph service.....	14,237.65
Telephone service.....	186,078.10
Other communication service.....	28,847.25
Travel expenses:	
Transportation.....	2,233,777.66
Subsistence.....	808,419.06
Special and miscellaneous expenses incident to travel.....	328,901.18
Transportation of things.....	539,324.25
Printing and binding, engraving, lithographing, photographing, and typewriting (service) (job work):	
Printing and binding.....	146,113.39
Furnishing of heat, light, power, etc.....	730,812.52
Rents.....	1,371,546.55
Repairs and alterations.....	3,530,068.60
Special and miscellaneous current expenses.....	290,207.50
Pension retirement salaries, annuities, World War allowances, and insurance losses:	
Training allowances.....	1,581,876.48
Military and naval compensation for death and disability.....	175,536,617.28
Other World War allowances (adjusted compensation).....	25,967,413.66
Insurance losses (converted insurance).....	11,772,059.90
Military and naval insurance.....	121,002,180.07
Grants, subsidies, and contributions:	
Burials.....	1,302,308.12
Tuition.....	123,204.51
Equipment:	
Furniture, furnishing, and fixtures.....	1,109,219.77
Educational, scientific, and recreational equipment.....	130,994.00
Other equipment.....	157,126.28
Structures and parts and nonstructural improvements to land (including fixed equipment):	9,450,000.00
Investments (includes working-capital funds):	
Investment of trust funds—	
1. Government life-insurance trust fund.....	55,250,987.79
2. Adjusted service certificate fund.....	100,592,216.68
Total.....	570,913,012.96

TABLE NO. 75.—Disbursements made from all appropriations by fiscal years

Fiscal year	Salaries and expenses								Increased compensation, 1920-1924
	1918-1924		1925		1926		1927		
	Direct	Allotment	Direct	Allotment	Direct	Allotment	Direct	Allotment	
To June 30, 1918	\$2,828,929.49								
1919	16,270,257.38								
1920	15,341,125.31								\$1,286,698.81
1921	9,405,474.86								731,794.89
1922	6,013,726.37								1,996,326.40
1923	33,003,791.50								2,751,180.02
1924	40,218,667.43	\$2,961,450.00							1,929,637.67
1925	719,859.97	1 1,211.77	\$44,422,196.26	\$18,580.00					6,093.68
1926	329.28		753,429.48		\$41,540,060.33	\$6,247.67			1 3,183.66
1927	1 17,673.85	1 230,893.59	1 50,386.92		570,627.68	1 200.00	\$36,210,040.05		1 20.00
Total	\$ 123,784,487.74	2,729,344.64	\$ 45,125,238.82	18,580.00	\$ 42,110,688.01	6,047.67	\$ 36,210,040.05		8,698,527.81

Fiscal year	Adjusted compensation			Allotment and allowance	Vocational rehabilitation				
	Administrative expense	Certificate fund	Dependent pay		No date	1920-1924	1925	1926	1926-7-2-28
To June 30, 1918				\$108,240,494.84					
1919				392,882,494.33					
1920				53,568,637.08	\$6,549,549.15	\$28,102,424.38			
1921				23,774,032.06	220,372.65	98,844,620.56			
1922				4,982,113.22	424,021.19	165,627,120.03			
1923				1 273,582.36	30,837.78	149,401,923.42			\$67,088.33
1924				13,082.95	774,137.90	106,180,311.97			7,437.19
1925	\$809,001.22	\$4,607,401.00	\$3,038,456.65	10,045.26	1 124.40	2,625,628.75	\$57,856,974.49		3,606.09
1926	26,060.38	15,354,526.61	5,626,193.46	1 21,200.66	1 164.34	4,249.54	1,127,466.30	\$24,709,000.73	1 70.63
1927	8.13	14,407,783.32	9,959,630.34	1 187,637.52	81.93	5,823.93	9,634.22	95,693.22	
Total	835,069.73	34,369,710.93	18,624,280.45	582,983,479.20	7,998,711.86	550,792,102.58	58,994,075.01	24,804,693.95	78,060.98

1 Credits.

2 Includes printing and binding, 1924, \$140,408.43.

3 Includes printing and binding, 1925, \$163,558.81.

4 Includes printing and binding, 1926, \$114,666.65.

5 Includes printing and binding, 1927, \$110,051.48.

TABLE NO. 75.—Disbursements made from all appropriations by fiscal years—Continued

Fiscal year	Medical and hospital services							
	1921-1922 ¹		1925		1926		1927	
	Direct	Allotment	Direct	Allotment	Direct	Allotment	Direct	Allotment
To June 30, 1918.....								
1919.....								
1920.....								
1921.....	\$2,930,193.02	\$42,347,658.00						
1922.....	35,654,904.52	33,315,953.90						
1923.....	40,190,847.29	11,257,817.34						
1924.....	24,214,233.91	5,404,508.37						
1925.....	5,408,176.77	1,280,765.02	\$21,270,349.32	\$6,635,610.07				
1926.....	195,684.65	1,653,629.69	5,009,105.60	961,067.38	\$21,536,417.08	\$5,149,302.18		
1927.....	125,400.74	1,226,067.94	177,311.97	184,735.32	5,804,709.64	633,125.68	\$26,876,786.36	\$4,399,249.54
Total.....	108,568,148.02	90,164,894.96	26,456,767.39	7,511,942.13	27,341,126.72	5,782,427.86	26,876,786.36	4,399,249.54

Fiscal year	Hospital facilities and services		Military and naval compensation	Military and naval insurance	U. S. Government life insurance	Marine and seamen's insurance	Soldiers' and sailors' civil relief claims	Total
	Direct	Allotment						
To June 30, 1918.....			\$341,365.27	\$840,388.88		\$26,565,511.28		\$128,816,680.86
1919.....			11,801,842.65	43,798,357.93		7,708,896.37		471,068,348.66
1920.....			108,122,714.02	85,926,099.99		514,881.79		294,469,099.75
1921.....			121,306,053.43	94,904,353.38	\$47,868.32	56,911.56		398,577,173.48
1922.....	\$871,500.00	\$45,000.00	123,350,542.45	102,983,870.13	2,056,695.47	249,075.78		481,608,706.07
1923.....	2,582,959.80	61,420.87	125,594,269.62	99,418,359.29	6,084,931.08	9,525.50	\$19,789.56	470,815,632.55
1924.....	9,216,649.86	11,724.59	115,494,991.41	101,239,643.19	6,700,194.79	4,100.00	251.16	415,138,398.17
1925.....	3,908,235.86	19,250.00	129,597,457.54	94,136,493.50	7,481,512.37	1,500.00	194.11	333,755,867.18
1926.....	4,511,491.97	1,319.93	164,437,139.42	136,975,113.97	8,962,316.34	133,583.69		436,105,174.36
1927.....	4,599,237.84		173,476,965.39	120,963,998.81	11,864,371.29		1110.64	405,348,447.70
Total.....	25,685,735.13	95,126.05	1,068,021,842.10	891,191,714.07	53,080,177.59	35,074,818.69	19,383.65	3,904,592,602.56

¹ Credits.² Includes \$12,000 paid to Edith W. Peacock, treasurer Peacock Military College; \$1,559.21 claims for damages, act Dec. 28, 1922.³ Includes \$12,153 relief of John T. Wilson.⁴ Includes \$1,004.45 claims for damages, act. Dec. 28, 1922; \$11,387.72 judgment, Court of Claims; \$5,000 relief of Immaculate Carlino; \$4,000 relief of Albert Hosley.⁵ Includes \$12,085.78 revolving fund loans outstanding July 1, 1927, also amounts carried in notes 6, 7, and 8.

CONSTRUCTION TABLE

TABLE NO. 76.—Statement showing United States veterans' hospitals, existing facilities and development of facilities under present appropriations only. (The construction and evacuation program as outlined by this table is tentative, and is subject to such changes as may be indicated by future development in the hospital load)

Hospital (number and location)	Present type	Total beds available June 30, 1926	Fiscal year 1927		Total beds available June 30, 1927	Fiscal year 1928		Total beds available June 30, 1928	Fiscal year 1929		Total beds available June 30, 1929	Estimated facilities ultimately to be abandoned ¹		Estimated ultimate permanent Government-owned beds
			Additions	Reductions		Estimated additions	Estimated reductions		Estimated additions	Estimated reductions		Leased properties	Government properties ²	
24. Palo Alto, Calif.	Neuropsychiatric	634		59	575	³ 322		897			897			897
27. Alexandria, La.	Tuberculosis	400			400			400	⁴ 400	400	400			400
32. Washington, D. C.	General	205			205			205			205			205
37. Waukesha, Wis.	do.	250			250			250			250			250
41. West Haven, Conn.	Tuberculosis	250		250										
42. Perry Point, Md.	Neuropsychiatric	906			906			906			906			906
44. West Roxbury, Mass.	do.	265	5		270		270							
48. Atlanta, Ga.	General	85			85			85			85			85
49. Philadelphia, Pa.	Neuropsychiatric	420	25		445			445			445			445
50. Whipple, Ariz.	Tuberculosis	600			600			600			600			600
51. Tucson, Ariz.	do.	272		20	252			252	⁴ 250	252	250			250
52. Boise, Idaho.	General	235			235			235			235			235
53. Dwight, Ill.	do.	225			225			225			225			225
55. Fort Bayard, N. Mex.	Tuberculosis	450			450			450			450			450
57. Knoxville, Iowa.	Neuropsychiatric	456	129		585			585			585			585
59. Tacoma, Wash.	General	296			296			296		296				
60. Oteen, N. C.	Tuberculosis	1,191		326	865	⁴ 165	165	865			865		500	365
62. Augusta, Ga.	Neuropsychiatric	574			574			574			574			574
63. Lake City, Fla.	General	252			252			252			252			252
65. St. Paul, Minn.	do.	361		361										
67. Kansas City, Mo.	do.	125	75		200			200			200	200		
68. Minneapolis, Minn.	Tuberculosis	308			308		308							
72. Fort Harrison, Mont.	do.	325			325			325			325			325
74. Gulfport, Miss.	Neuropsychiatric	425			425			425			425			425
Edw. Hines, Jr., Maywood, Ill.	General	952	33		985			985			985			985
77. Portland, Oreg.	do.	145			145			145	⁴ 300	145	300			300

¹ Necessity for replacement dependent upon future demand.

² Facilities are of temporary frame construction.

³ Fiscal year appropriations.

⁴ Permanent facilities to replace temporary ones (Pub. 587, 68th Cong., Mar. 3, 1925).

⁵ New hospital to replace leased facilities.

TABLE NO. 70.—Statement showing United States veterans' hospitals, existing facilities and development of facilities under present appropriations only. (The construction and occupation program as outlined by this table is tentative, and is subject to such changes as may be indicated by future development in the hospital load)—Continued

Hospital (number and location)	Present type	Total beds available June 30, 1926	Fiscal year 1927		Total beds available June 30, 1927	Fiscal year 1928		Total beds available June 30, 1928	Fiscal year 1929		Total beds available June 30, 1929	Estimated facilities ultimately to be abandoned		Estimated ultimate permanent Government-owned beds
			Additions	Reductions		Estimated additions	Estimated reductions		Estimated additions	Estimated reductions		Leased properties	Government properties	
78. North Little Rock, Ark.	Neuropsychiatric	684		16	648			648			648			648
79. Oatwood, Ky.	Tuberculosis	374			374			374			374			374
80. Fort Lyon, Colo.	do.	500			500			500			500			500
81. Bronx, N. Y.	Neuropsychiatric	794	176		970			970			970			970
84. Alden, Ia.	General	324		164	200			200			200		200	
85. Walla Walla, Wash.	Tuberculosis	250			250			250			250			250
86. Sheridan, Wyo.	Neuropsychiatric	431			431			431			431			431
88. Memphis, Tenn.	General	325			325			325			325			325
89. Rutland Heights, Mass.	Tuberculosis	422		2	420			420			420			420
90. Muskogee, Okla.	General	350	100		450			450			450			450
91. Tuskegee, Ala.	do.	606	26		642			642			642			642
92. Jefferson Barracks, Mo.	do.	243			243			243			243			243
93. Legion, Tex.	Tuberculosis	480			480			480			480			480
94. American Lake, Wash.	Neuropsychiatric	360	40		400			400			400			400
95. Northampton, Mass.	do.	452			452	88		535			535			535
96. Sunmount, N. Y.	Tuberculosis	410		45	365			365			365			365
97. Chillicothe, Ohio	Neuropsychiatric	452	8		460			460			460			460
98. Castle Point, N. Y.	Tuberculosis	400		7	393			393			393			393
99. Excelsior Springs, Mo.	General	125			125			125			125			125
100. Camp Custer, Mich.	Neuropsychiatric	568	12		578			578			578			578
101. St. Cloud, Minn.	do.	830		5	825			825			825			825
102. Livermore, Calif.	Tuberculosis	802			802			802			802			802
103. Aspinwall, Pa.	do.	177	49		226			226			226			226
104. San Fernando, Calif.	do.	202			202	32		234			234			234
105. North Chicago, Ill.	Neuropsychiatric	536	211		536			536			536			536
106. Minneapolis, Minn.	General	558	558		558			558			558			558
107. Bedford, Mass.	Neuropsychiatric					350		350			350			350
108. Northport, N. Y.	do.					1,000		1,000			1,000			1,000
Fargo, N. Dak.	General								50		50			50
Total		20,598	1,457	1,245	20,810	1,952	743	22,019	1,000	1,093	21,926	200	700	21,026

¹ Fiscal year appropriations.

² Replacement by contractor of building destroyed by explosion.

³ Pub. 587, 68th Cong., Mar. 3, 1925.

PERSONNEL TABLE

TABLE NO. 77.—Comparative statement showing, by location, the total personnel and aggregate annual salaries in the United States Veterans' Bureau, together with the net increase or decrease for the fiscal year 1926-27

Location	June 30, 1926				June 30, 1927				Net increase or decrease			
	Total number of employees	Total annual salaries			Total number of employees	Total annual salaries			Employees		Aggregate annual salaries	
		Annual salaries	Total allowances	Total aggregate annual salaries		Annual salaries	Total allowances	Total aggregate annual salaries	Increase	Decrease	Increase	Decrease
Central office.....	4, 179 33	\$7, 387, 458 (1)		\$7, 387, 458 (1)	4, 291 47	\$7, 592, 988 (1)	\$540	\$7, 593, 528 (1)	112 14		\$206, 070 (1)	
Total.....	4, 212	7, 387, 458		7, 387, 458	4, 338	7, 592, 988	540	7, 593, 528	126		206, 070	
Regional offices.....	7, 119 19 11	13, 450, 033 (1) (2)		13, 450, 033 (1) (2)	6, 011 2	11, 602, 877 (2)		11, 602, 877 (2)		1, 108 19 9		\$1, 847, 156 (1) (2)
Total.....	7, 149	13, 450, 033		13, 450, 033	6, 013	11, 602, 877		11, 602, 877		1, 136		1, 847, 156
United States veterans' hospitals.....	12, 280 174 208	15, 705, 291 (1) (2)	2, 825, 196	18, 530, 487 (1) (2)	12, 582 214 283	16, 336, 920 (1) (2)	2, 843, 544	19, 180, 464 (1) (2)	302 40 75		649, 977 (1) (2)	
Total.....	12, 662	15, 705, 291	2, 825, 196	18, 530, 487	13, 079	16, 336, 920	2, 843, 544	19, 180, 464	417		649, 977	
Central office coordination groups—												
Territorial areas.....	59	206, 808		206, 808	34	129, 272		129, 272		25		77, 536
Central board of appeals (field).....	113	293, 013		293, 013	81	212, 453		212, 453		32		80, 560
Supply depots.....	183 19	266, 374 (1)		266, 374 (2)	151	220, 460		220, 460		32 19		45, 914 (2)
Total.....	202	266, 374		266, 374	151	220, 460		220, 460		51		45, 914
Total per annum.....	23, 933	37, 308, 977	2, 825, 196	40, 134, 173	23, 150	36, 094, 970	2, 844, 084	38, 939, 054		783		1, 195, 119
Total per diem.....	226	(1)		261	261	(1)		(1)	35		(1)	
Total per hour.....	238	(2)		285	285	(2)		(2)	47		(2)	
Grand total.....	24, 397	37, 308, 977	2, 825, 196	40, 134, 173	23, 696	36, 094, 970	2, 844, 084	38, 939, 054		701		1, 195, 119

¹ Per diem.

² Per hour.

TABLE 78.—Comparative statement showing, by location, the estimated annual salaries of per diem and per hour employees, together with the net increase or decrease, for the fiscal year 1926-27

Location	June 30, 1926						June 30, 1927						Net increase or decrease			
	Per diem		Per hour		Total		Per diem		Per hour		Total		Employees		Estimated annual salaries	
	Number of employees	Estimated annual salaries	Number of employees	Estimated annual salaries	Number of employees	Estimated annual salaries	Number of employees	Estimated annual salaries	Number of employees	Estimated annual salaries	Number of employees	Estimated annual salaries	Increase	Decrease	Increase	Decrease
Central office.....	33	\$23, 625			33	\$23, 625	47	\$30, 625			47	\$30, 625	14		\$7, 000	
Regional offices.....	19	61, 290	11	\$14, 856	30	76, 146			2	\$3, 840	2	3, 840		28		\$72, 306
United States veterans' hospitals.....	174	257, 190	208	348, 768	382	605, 958	214	307, 605	283	435, 024	497	742, 629	115		136, 671	
Supply depots.....			19	22, 800	19	22, 800								19		22, 800
Total.....	226	342, 105	238	386, 424	464	728, 529	261	338, 230	285	438, 864	546	777, 004	82		48, 565	

NOTE.—For the fiscal year 1926-27 the estimated annual salaries for per diem employees assigned to medical service of central office are based on 25 days per annum, while the estimated annual salaries of all other per diem and per hour employees are based on 300 days per annum.

APPENDIX

NEW LEGISLATION

LAWS FOR THE RELIEF OF VETERANS OF THE WORLD WAR ENACTED DURING THE FISCAL YEAR ENDING JUNE 30, 1927

[PUBLIC—No. 448—69TH CONGRESS]

[H. R. 12175]

An Act To amend the World War Veterans' Act, 1924

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That section 10 of the World War Veterans' Act, 1924, approved June 7, 1924, is hereby amended to read as follows:

"Sec. 10. The director, subject to the general directions of the President, shall be responsible for the proper examination, medical care, treatment, hospitalization, dispensary, and convalescent care necessary and reasonable after-care, welfare of, nursing, vocational training, and such other services as may be necessary in the carrying out of the provisions of this Act, and for that purpose is hereby authorized, at the direction of the President or with the approval of the head of the department concerned, to utilize the now existing or future facilities of the United States Public Health Service, the War Department, the Navy Department, the Interior Department, the National Home for Disabled Volunteer Soldiers, and such other governmental facilities as may be made available for the purposes set forth in this Act; and such governmental agencies are hereby authorized to furnish such facilities, including personnel, equipment, medical, surgical, and hospital services and supplies as the director may deem necessary and advisable in carrying out the provisions of this Act, in addition to such governmental facilities as are hereby made available.

"When, in the opinion of the director, the facilities and services utilized for the hospitalization, medical care, and treatment for beneficiaries under this Act are unsatisfactory, the director shall make arrangements for the further hospitalization, care, and treatment of such beneficiaries by other means: *Provided*, That the director is hereby authorized to hospitalize women veterans entitled to hospitalization under the provisions of this Act and amendments thereto, in other than Government hospitals.

"In the event that there are not sufficient and satisfactory Government hospital and out-patient dispensary facilities for the proper medical care and treatment of beneficiaries under this Act, and the director deems it necessary and advisable to improve existing facilities or to secure additional Government facilities, he may, within the limits of appropriations made for carrying out the provisions of this paragraph, alter, improve, or extend existing governmental facilities, or acquire additional facilities by purchase or otherwise: *Provided, however*, That no alteration, improvement, or extension which will materially increase the bed capacity for patients of any hospital or institution shall be made, nor shall any new facilities be acquired without the approval of the President. Such new property and structures as may be improved, extended, or acquired shall become part of the permanent equipment of the United States Veterans' Bureau or of some one of the now existing agencies of the Government, including the War Department, Navy Department, Interior Department, Treasury Department, the National Home for Disabled Volunteer Soldiers, in such way as will best serve the present emergency, taking into consideration the future services to be rendered the veterans of the World War, including the beneficiaries under this Act.

"In the event Government hospital facilities are insufficient or inadequate the director may contract with State, municipal, or, in exceptional cases, with private hospitals for such medical, surgical, and hospital services and supplies as may be required, and such contracts may be made for a period of not exceeding three years and may be for the use of a ward or other hospital unit or on such other basis as may be in the best interest of the beneficiaries under this Act.

"There are here permanently transferred to the Veterans' Bureau all hospitals now or formerly under the jurisdiction of the Public Health Service or of the Treasury Department, the operation, management, or control of which have heretofore been transferred by the President to said bureau pursuant to the authority contained in section 9 of the Act entitled 'An Act to establish a Veterans' Bureau and to improve the facilities and service of such bureau and further to amend and modify the War Risk Insurance Act,' approved August 9, 1921."

SEC. 2. That section 21 of the World War Veterans' Act, as amended, is hereby amended to read as follows:

SEC. 21. (1) That where any payment under this Act is to be made to a minor, other than a person in the military or naval forces of the United States, or to a person mentally incompetent, or under other legal disability adjudged by a court of competent jurisdiction, such payment may be made to the person who is constituted guardian, curator, or conservator by the laws of the State of residence of claimant, or is otherwise legally vested with the care of the claimant or his estate: *Provided*, That as to cases arising in the District of Columbia where in the opinion of the director any guardian, curator, conservator, or other person is acting as fiduciary in such a number of cases as to make it impracticable to conserve properly the estates or to supervise the persons of the wards, the director is hereby authorized to refuse to make future payments in such number of cases as he may deem proper: *Provided further*, That prior to receipt of notice by the bureau that any such person is under such other legal disability adjudged by some court of competent jurisdiction, payment may be made to such person direct: *Provided further*, That for the purpose of payments of benefits under Title II hereof, where no guardian, curator, or conservator of the person under a legal disability has been appointed under the laws of the State of residence of the claimant, the director shall determine the person who is otherwise legally vested with the care of the claimant or his estate.

(2) Whenever it appears that any guardian, curator, conservator, or other person is not in the opinion of the director properly executing the duties of his trust or has collected or is attempting to collect fees, commissions, or allowances that are inequitable or are in excess of those allowed by law for the duties performed or expenses incurred, or has failed to make such payments as may be necessary for the benefit of the ward or the dependents of the ward, then and in that event the director is hereby empowered by his duly authorized attorney to appear in the court which has appointed such fiduciary and make proper presentation of such matters to the court: *Provided*, That the director in his discretion may suspend payments to any such guardian, curator, conservator, or other person who shall neglect or refuse, after reasonable notice, to render an account to the director from time to time showing the application of such payments for the benefit of such minor or incompetent beneficiary.

Authority is hereby granted for the payment of any court or other expenses incident to any investigation or court proceeding for the appointment or removal of any guardian, curator, conservator, or other person legally vested with the care of the claimant or his estate, or in connection with the administration of such estates by such fiduciaries, when such payment is authorized by the director.

SEC. 3. That section 26 of the World War Veterans' Act, 1924, approved June 7, 1924, as amended March 4, 1925, is hereby amended to read as follows:

"SEC. 26. That the amount of the monthly installments of compensation, yearly renewable term insurance, or accrued maintenance and support allowance which has become payable under the provisions of Titles II, III, or IV hereof, but which has not been paid prior to the death of the person entitled to receive the same, may be payable to the personal representatives of such person, or in the absence of a duly appointed legal representative where the combined amounts payable are \$1,000 or less, the director shall allow and pay such sum to such person or persons as would under the laws of the State of residence of the decedent be entitled to his personal property in case of intestacy: *Provided*, That in cases where the estate of the decedent would escheat under the laws of the place of his residence, such installments shall not be paid to the estate of the decedent but shall escheat to the United States and shall be credited to the appropriation from which the original award was made."

SEC. 4. That section 28 of the World War Veterans' Act, 1924, approved June 7, 1924, is hereby amended to read as follows:

"SEC. 28. There shall be no recovery of payments from any beneficiary who, in the judgment of the director, is without fault on his part, and where, in the judgment of the director, such recovery would defeat the purpose of benefits otherwise authorized or would be against equity and good conscience.

"When under the provisions of this section the recovery of a payment made from the United States Government life insurance fund is waived, the United States Government life insurance fund shall be reimbursed for the amount involved from the current appropriation for military and naval insurance."

SEC. 5. That a new section be added to Title I of the World War Veterans' Act, 1924, approved June 7, 1924, to be known as section 31, to read as follows:

"SEC. 31. The Veterans' Bureau shall, under regulations to be prescribed by the director, reimburse beneficiaries hospitalized or who have been hospitalized in Veterans' Bureau hospitals for any loss of personal effects heretofore or hereafter sustained by fire while such effects are or were stored in designated locations in Veterans' Bureau hospitals."

SEC. 6. That a new section be added to Title I of the World War Veterans' Act, 1924, as amended, to be known as section 33, and to read as follows:

"SEC. 33. The director, in his discretion, may provide courses of instruction for the professional personnel of the bureau and may detail employees to attend the same, and may detail not more than 2 per centum of such professional personnel to attend professional courses conducted by other than bureau agencies, and such employees in addition to their salaries shall be entitled to the payment of expenses incident to such detail, including transportation: *Provided, however,* That travel or instruction outside the continental limits of the United States shall not be authorized under this section."

SEC. 7. That section 200 of the World War Veterans' Act, 1924, approved June 7, 1924, as amended, is hereby amended to read as follows:

"SEC. 200. For death or disability resulting from personal injury suffered or disease contracted in the military or naval service on or after April 6, 1917, and before July 2, 1921, or for an aggravation or recurrence of a disability existing prior to examination, acceptance, and enrollment for service, when such aggravation was suffered or contracted in, or such recurrence was caused by, the military or naval service on or after April 6, 1917, and before July 2, 1921, by any commissioned officer or enlisted man, or by any member of the Army Nurse Corps (female), or of the Navy Nurse Corps (female), when employed in the active service under the War Department or Navy Department, the United States shall pay to such commissioned officer or enlisted man, member of the Army Nurse Corps (female), or of the Navy Nurse Corps (female), or women citizens of the United States who were taken from the United States by the United States Government and who served in base hospitals overseas, or, in the discretion of the director, separately to his or her dependents, compensation as hereinafter provided; but no compensation shall be paid if the injury, disease, aggravation, or recurrence has been caused by his own willful misconduct: *Provided,* That no person suffering from paralysis, paresis, or blindness shall be denied compensation by reason of willful misconduct, nor shall any person who is helpless or bedridden as a result of any disability be denied compensation by reason of willful misconduct. That for the purposes of this Act every such officer, enlisted man, or other member employed in the active service under the War Department or Navy Department who was discharged or who resigned prior to July 2, 1921, and every such officer, enlisted man, or other member employed in the active service under the War Department or Navy Department on or before November 11, 1918, who on or after July 2, 1921, is discharged or resigns, shall be conclusively held and taken to have been in sound condition when examined, accepted, and enrolled for service, except as to defects, disorders, or infirmities made of record in any manner by proper authorities of the United States at the time of, or prior to, inception of active service, to the extent to which any such defect, disorder, or infirmity was so made of record: *Provided,* That an ex-service man who is shown to have or, if deceased, to have had, prior to January 1, 1925, neuropsychiatric disease and spinal meningitis, an active tuberculosis disease, paralysis agitans, encephalitis lethargica, or amoebic dysentery developing a 10 per centum degree of disability or more in accordance with the provisions of subdivision (4) of section 202 of this Act, shall be presumed to have acquired his disability in such service between April 6, 1917, and July 2, 1921, or to have suffered an aggravation of a preexisting neuropsychiatric disease and spinal meningitis, tuberculosis, paralysis agitans, encephalitis lethargica, or amoebic dysentery in such service between said dates, and said presumption shall be conclusive in cases of active tuberculosis disease and spinal meningitis, but in all other cases said presumption shall be rebuttable by clear and convincing evidence; but nothing in this proviso shall be construed to prevent a claimant from receiving the benefits of compensation and medical care and treatment for a disability due to these diseases of more than 10 per centum degree (in accord-

ance with the provisions of subdivision (4) of section 202 of this act) on or subsequent to January 1, 1925, if the facts in the case substantiate his claim."

Sec. 8. That paragraph (1) of section 201 of the World War Veterans' Act, 1924, approved June 7, 1924, be amended, to read as follows:

"(1) If death occur or shall have occurred subsequent to April 6, 1917, and before discharge or resignation from the service, the United States Veterans' Bureau shall pay for burial and funeral expenses and the return of body to his home a sum not to exceed \$100, as may be fixed by regulation. Where a veteran of any war, including those women who served as Army nurses under contracts between April 21, 1898, and February 2, 1901, who was not dishonorably discharged, dies after discharge or resignation from the service and does not leave assets which, in the judgment of the director, should be applied to meet the expenses of burial and funeral and the transportation of the body (the decision of the director to be binding for all purposes), the United States Veterans' Bureau shall pay the following sums: For a flag to drape the casket, and after burial to be given to the next of kin of the deceased, a sum not exceeding \$7; also, for burial and funeral expenses and the transportation of the body (including preparation of the body) to the place of burial, a sum not exceeding \$100 to cover such items and to be paid to such person or persons as may be fixed by regulations: *Provided*, That when such person dies while receiving from the bureau compensation or vocational training, the above benefits shall be payable in all cases: *Provided further*, That where such person, while receiving from the bureau medical, surgical, or hospital treatment, or vocational training, dies away from home and at the place to which he was ordered by the bureau, or while traveling under orders of the bureau, the above benefits shall be payable in all cases and in addition thereto the actual and necessary cost of the transportation of the body of the person (including preparation of the body) to the place of burial, within the continental limits of the United States, its Territories, or possessions, and including also, in the discretion of the director, the actual and necessary cost of transportation of an attendant: *And provided further*, That no accrued pension, compensation, or insurance due at the time of death shall be deducted from the sum allowed."

Sec. 9. Paragraphs 3, 7, and 10 of section 202 are hereby amended to read as follows:

"Sec. 202. (3) If and while the disability is rated as total and permanent, the rate of compensation shall be \$100 per month: *Provided, however*, That the permanent loss of the use of both feet, or both hands, or of both eyes, or of one foot and one hand, or of one foot and one eye, or of one hand and one eye, or the loss of hearing of both ears, or the organic loss of speech, or becoming permanently helpless or permanently bedridden, shall be deemed to be total, permanent disability: *Provided further*, That the compensation for the loss of the use of both eyes shall be \$150 per month, and that compensation for the loss of the use of both eyes and one or more limbs shall be \$200 per month: *Provided further*, That for double total, permanent disability the rate of compensation shall be \$200 per month.

"That any ex-service man shown to have a tuberculous disease of compensable degree, and who has been hospitalized for a period of one year, and who in the judgment of the director will not reach a condition of arrest by further hospitalization, and whose discharge from hospitalization will not be prejudicial to the beneficiary or his family, and who is not, in the judgment of the director, feasible for training, shall, upon his request, be discharged from hospitalization and rated as temporarily totally disabled, said rating to continue for the period of three years: *Provided, however*, That nothing in this subdivision shall deny the beneficiary the right, upon presentation of satisfactory evidence, to be adjudged to be permanently and totally disabled: *Provided further*, That in addition to the compensation above provided, the injured person shall be furnished by the United States such reasonable governmental medical, surgical, and hospital services, including payment of court costs and other expenses incident to proceedings heretofore or hereafter taken for commitment of mentally incompetent persons to hospitals for care and treatment of the insane, and shall be furnished with such supplies, including wheel chairs, artificial limbs, trusses, and similar appliances, as the director may determine to be useful and reasonably necessary, which wheel chairs, artificial limbs, trusses, and similar appliances may be procured by the bureau in such manner, either by purchase or manufacture, as the director may determine to be advantageous and reasonably necessary: *Provided*, That nothing in this Act shall be construed to affect the necessary military control over any member of the Military or Naval Establishments before he shall have been discharged from the military or naval service: *Provided, further*, That where any person entitled to the benefits of this paragraph has heretofore been hospitalized

in a State institution, the United States Veterans' Bureau is hereby authorized to reimburse such person, or his estate, where payment has been made to the State out of the funds of such person, or to reimburse the State or any subdivision thereof where no payment has been made for the reasonable cost of such services from the date of admission.

"(7) Where any disabled person having neither wife, child, nor dependent parent shall, after July 1, 1924, have been maintained by the Government of the United States for a period or periods amounting to six months in an institution or institutions, and shall be deemed by the director to be insane, the compensation for such person shall thereafter be \$20 per month so long as he shall thereafter be maintained by the bureau in an institution; and such compensation may, in the discretion of the director, be paid to the chief officer of said institution to be used for the benefit of such person: *Provided, however*, That if such person shall recover his reason and shall be discharged from such institution as competent, such additional sum shall be paid him as would equal the total sum by which his compensation has been reduced through the provisions of this subdivision.

"All or any part of the compensation, of any mentally incompetent inmate of an institution, may, in the discretion of the director, be paid to the chief officer of said institution to be properly accounted for and to be used for the benefit of such inmate, or may, in the discretion of the director, be apportioned to wife, child, or children, or dependent parents, in accordance with regulations.

"That any ex-service person shown to have had a tuberculous disease of a compensable degree, who in the judgment of the director has reached a condition of complete arrest of his disease, shall receive compensation of not less than \$50 per month: *Provided, however*, That nothing in this provision shall deny a beneficiary the right to receive a temporary total rating for six months after discharge from a one year's period of hospitalization: *Provided further*, That no payments under this provision shall be retroactive and the payments hereunder shall commence from the date of the passage of this Act or the date the disease reaches a condition of arrest, whichever be the later date.

"After June 30, 1927, the monthly rate of compensation for all veterans (other than those totally and permanently disabled), who are being maintained by the bureau in an institution of any description, and who are without wife, child, or dependent parents, shall not exceed \$40.

"(10) That all hospital facilities under the control and jurisdiction of the bureau shall be available for every honorably discharged veteran of the Spanish-American War, the Philippine insurrection, the Boxer rebellion, or the World War suffering from neuropsychiatric or tubercular ailments and diseases, paralysis agitans, encephalitis lethargica, or amoebic dysentery, or the loss of sight of both eyes, regardless whether such ailments or diseases are due to military service or otherwise, including traveling expenses as granted to those receiving compensation and hospitalization under this Act. The director is further authorized, so far as he shall find that existing Government facilities permit, to furnish hospitalization and necessary traveling expenses incident to hospitalization to veterans of any war, military occupation, or military expedition, including those women who served as Army nurses under contracts between April 21, 1898, and February 2, 1901, not dishonorably discharged, without regard to the nature or origin of their disabilities: *Provided*, That any and all laws applicable to women who belonged to the Nurse Corps of the Army after February 2, 1901, shall apply equally to members of the Army Nurse Corps who served under contract between April 21, 1898, and February 2, 1901, including all women who served honorably as nurses, chief nurses, or superintendent of said corps in said period: *Provided*, That preference to admission to any Government hospital for hospitalization under the provisions of this subdivision shall be given to those veterans who are financially unable to pay for hospitalization and their necessary traveling expenses: *Provided further*, That where a veteran hospitalized under the authority of this subdivision is financially unable to supply himself with clothing, he shall also be furnished with such clothing as the director may deem necessary: *Provided further*, That where a veteran entitled to hospitalization under this subdivision is suffering with a disease or injury necessitating the wearing of a prosthetic appliance and is financially unable to supply himself with same, upon an affidavit to that effect the director is hereby authorized to furnish such appliance and to effect necessary repairs to the same without cost to the veteran: *And provided further*, That the pension of a veteran entitled to hospitalization under this subdivision shall not be subject to deduction, while such veteran is hospitalized in any Government hospital, for board, maintenance, or any other purpose incident to hospitalization: *Provided further*,

That the Act of May 4, 1898, entitled 'An Act making appropriations for the naval service for the fiscal year ending June 30, 1899, and for other purposes,' the Act of February 28, 1861, as amended by the Act of February 2, 1909, relative to the Government hospital for the insane in the District of Columbia, or any other Act, in so far as they are inconsistent with the provisions of this section be, and they are, hereby modified accordingly."

"In the insular possessions or Territories of the United States the director is further authorized to furnish hospitalization in other than Government hospitals."

Sac. 10. That section 203 of the World War Veterans' Act, 1924, approved June 7, 1924, is hereby amended to read as follows:

"Sac. 203. That every person applying for or in receipt of compensation for disability under the provisions of this title and every person applying for treatment under the provisions of subdivisions (9) or (10) of section 202 hereof, shall, as frequently and at such times and places as may be reasonably required, submit himself to examination by a medical officer of the United States or by a duly qualified physician designated or approved by the director. He may have a duly qualified physician designated and paid by him present to participate in such examination. For all examinations he shall, in the discretion of the director, be paid his reasonable traveling and other expenses and also a per diem allowance of \$2.65 per day for the period of travel and observation. If he shall neglect or refuse to submit to such examination, or shall in any way obstruct the same, his right to claim compensation under this title shall be suspended until such neglect, refusal, or obstruction ceases. No compensation shall be payable while such neglect, refusal, or obstruction continues, and no compensation shall be payable for the intervening period."

Sac. 11. That section 206 of the World War Veterans' Act of 1924, approved June 7, 1924, be, and the same is hereby, amended to read as follows:

"Sac. 206. That no compensation shall be payable for death or disability which does not occur prior to or within one year after discharge or resignation from the service, except as provided in section 200 of this Act, and except where there is an official record of the injury during service or at the time of separation from active service, or where within three years from the approval of this Act, satisfactory evidence is furnished the bureau to establish that the injury was suffered or aggravated during active service. Where there is official record of injury during service compensation shall be payable in accordance with the provisions of this title, for death or disability whenever occurring, proximately resulting from such injury."

Sac. 12. That section 209 of the World War Veterans' Act, 1924, approved June 7, 1924, is hereby amended to read as follows:

"Sac. 209. That no compensation shall be payable and that (except as provided by subdivision (10) of section 202 hereof) no treatment shall be furnished unless a claim therefor be filed in case of disability within five years after discharge or resignation from the service, or in case of death during the service, within five years after such death is officially recorded in the department under which he may be serving: *Provided, however,* That where compensation is payable for death or disability occurring after discharge or resignation from the service, claim must be made within five years after such death or at the beginning of such disability."

"The time herein provided may be extended by the director not to exceed five years for good cause shown. If at the time that any right accrues to any person under the provisions of this title such person is a minor, or is of unsound mind or physically unable to make a claim, the time herein provided shall not begin to run until such disability ceases."

Sac. 13. That section 212 of the World War Veterans' Act, 1924, approved June 7, 1924, is hereby amended to read as follows:

"Sac. 212. This Act is intended to provide a system for the relief of persons who were disabled, and for the dependents of those who died as a result of disability suffered in the military service of the United States between April 6, 1917, and July 2, 1921. For such disabilities and deaths no other pension laws or laws providing for gratuities or payments in the event of death in the service shall be applicable: *Provided, however,* That the laws relating to the retirement of persons in the regular military or naval service shall not be considered to be laws providing for pensions, gratuities, or payments within the meaning of this section: *And provided further,* That compensation under this title shall not be paid while the person is in receipt of active service or retirement pay, this proviso to be effective as of April 6, 1917. Titles II and IV of this Act shall not be applicable to any disability or resultant death in the service if such disability occurred as a result of service prior to April 6, 1917, or after July 2, 1921: *Provided, however,* That the

schedule of ratings provided by section 202 (4) of this statute shall hereafter be applicable to disabilities occurring as a result of service prior to April 6, 1917, or after July 2, 1921, wherever a person has an accrued right to compensation under section 602 of the World War Veterans' Act, 1924."

Sec. 14. That section 300 of the World War Veterans' Act, 1924, approved June 7, 1924, as amended March 4, 1925, is hereby amended to read as follows:

"Sec. 300. In order to give to every commissioned officer and enlisted man and to every member of the Army Nurse Corps (female) and of the Navy Nurse Corps (female) when employed in active service under the War Department or Navy Department protection for themselves and their dependents, the United States, upon application to the bureau and without medical examination, shall grant United States Government life insurance (converted insurance) against the death or total permanent disability of any such person in any multiple of \$500, and not less than \$1,000 or more than \$10,000, upon the payment of the premiums as hereinafter provided. Such insurance must be applied for within one hundred and twenty days after enlistment or after entrance into or employment in the active service and before discharge or resignation: *Provided*, That any member of the reserve forces whose application was accepted at a time when he was in attendance at a military or naval training camp or station, and from whom premiums were collected, and who becomes or has become totally or permanently disabled, or dies or has died, shall be deemed to have made valid application therefor. This proviso shall not authorize the granting of more than \$10,000 insurance to any one person: *Provided further*, That each officer and enlisted man of the Coast Guard who is serving on active duty at the time of the passage of this amendatory Act, or who subsequent thereto enters the Coast Guard Service, shall be granted insurance in accordance with the terms of this section upon application within one hundred and twenty days of the passage of this amendatory Act, or date of enlistment or entry into the Coast Guard, whichever is the later date, and before retirement, discharge, or resignation.

"The insurance shall be payable only to a spouse, child, grandchild, parent, brother, sister, uncle, aunt, nephew, niece, brother-in-law, or sister-in-law, or to any or all of them, and also during total and permanent disability to the injured person.

"Where a beneficiary at the time of designation by the insured is within the permitted class of beneficiaries and is the designated beneficiary at the time of the maturity of the insurance because of the death of the insured, such beneficiary shall be deemed to be within the permitted class even though the status of such beneficiary shall have been changed.

"The United States shall bear the expenses of administration and the excess mortality and disability cost resulting from the hazards of war. The premium rates shall be the net rates based upon the American Experience Table of Mortality and interest at $3\frac{1}{2}$ per centum per annum. This section shall be deemed to be in effect as of June 7, 1924."

Sec. 15. That section 304 of the World War Veterans' Act, 1924, approved June 7, 1924, is hereby amended to read as follows:

"Sec. 304. In the event that all provisions of the rules and regulations other than the requirements as to the physical condition of the applicant for insurance have been complied with an application for reinstatement, in whole or in part, of lapsed or canceled yearly renewable term insurance or United States Government life insurance (converted insurance) hereafter made may be approved if made within one year after the passage of this amendatory Act or within two years after the date of lapse or cancellation: *Provided*, That the applicant's disability is the result of an injury or disease, or of an aggravation thereof, suffered or contracted in the active military or naval service during the World War: *Provided further*, That the applicant during his lifetime submits proof satisfactory to the director showing that he is not totally and permanently disabled. As a condition, however, to the acceptance of an application for the reinstatement of lapsed or canceled yearly renewable term insurance, where the requirements as to the physical condition of the applicant have not been complied with, or, for the reinstatement of the United States Government life insurance (converted insurance), the applicant shall be required to pay all the back monthly premiums which would have become payable if such insurance had not lapsed, together with interest at the rate of 5 per centum per annum, compounded annually, on each premium from the date said premium is due by the terms of the policy: *Provided further*, That where within one year of this amendatory Act all of the requirements for reinstatement of yearly renewable term insurance under this section are complied with, except the payment of unpaid premiums with interest, and proof satisfactory to the director is furnished showing the applicant is unable to pay

such premiums with interest or some part thereof, the application may be approved; and the amount of unpaid premiums with interest as provided in this section shall be placed as an interest-bearing indebtedness against the insurance, such indebtedness to bear interest at the rate of 5 per centum per annum, compounded annually, to be deducted in any settlement thereunder: *And provided further*, That no yearly renewable term insurance shall be reinstated after July 2, 1927."

Sec. 16. That section 305 of the World War Veterans' Act, 1924, approved June 7, 1924, is hereby amended to read as follows:

"Sec. 305. Where any person has heretofore allowed his insurance to lapse, or has canceled or reduced all or any part of such insurance, while suffering from a compensable disability for which compensation was not collected and dies or has died, or becomes or has become permanently and totally disabled and at the time of such death or permanent total disability was or is entitled to compensation remaining uncollected, then and in that event so much of his insurance as said uncollected compensation, computed in all cases at the rate provided by section 302 of the War Risk Insurance Act as amended December 24, 1919, would purchase if applied as premiums when due, shall not be considered as lapsed, canceled or reduced; and the United States Veterans' Bureau is hereby authorized and directed to pay to said soldier, or his beneficiaries, as the case may be, the amount of said insurance less the unpaid premiums and interest thereon at 5 per centum per annum compounded annually in installments as provided by law: *Provided*, That insurance hereafter revived under this section and section 309 by reason of permanent and total disability or by death of the insured, shall be paid only to the insured, his widow, child or children, dependent mother or father, and in the order named unless otherwise designated by the insured during his lifetime or by last will and testament."

Sec. 17. That a new section be added to the World War Veterans' Act, 1924, approved June 7, 1924, to be known as section 308, to read as follows:

"Sec. 308. Wherever yearly renewable term insurance or United States Government life (converted) insurance has heretofore lapsed for the nonpayment of premiums, and the insured has forwarded to the United States Veterans' Bureau, not later than the seventh day of the month following the month for which the unpaid premium was due, an amount sufficient to reinstate the insurance under bureau regulations heretofore or hereafter issued, the director of the bureau is hereby authorized and directed to reinstate such insurance whenever it is shown to his satisfaction that the insured was at the time of the making of the remittance in the state of health required by bureau regulations."

Sec. 18. That a new section be added to the World War Veterans' Act, 1924, approved June 7, 1924, to be known as section 309, and to read as follows:

"Sec. 309. Where any person allowed his insurance to lapse and died after February 24, 1919, and prior to collecting the \$60 bonus provided by the Act of February 24, 1919 (Fortieth Statutes at Large, page 1151), then and in that event his insurance shall not be considered as lapsed during such period as said uncollected bonus would, if applied to the payment of premiums when due, equal or exceed the same, and the United States Veterans' Bureau is hereby authorized and directed to pay to his beneficiaries under said policy the amount of said insurance, less the premiums and interest thereon at 5 per centum per annum, compounded annually, in installments, as provided by law."

Sec. 19. That section 406 of the World War Veterans' Act, 1924, as amended be further amended to read as follows:

"Sec. 406. That no vocational training shall be granted after June 30, 1926, and except as provided by section 404 hereof, no training allowance shall thereafter be paid to any person: *Provided*, That any person who is receiving placement training on June 30, 1926, may be continued in such training to January 1, 1927, and any person receiving educational training in schools or institutions on June 30, 1926, may be continued in training for not more than two years after the passage of this amendatory Act, and may be paid the maintenance and support allowance provided by sections 401 and 404 hereof. For the purposes of this section the unexpended balance of the appropriation for vocational rehabilitation for the fiscal year, 1926, shall be available."

Sec. 20. That a new section be added to Title V of the World War Veterans' Act, 1924, approved June 7, 1924, to be known as section 506, and to read as follows:

"Sec. 506. The provisions of this title shall be applicable to the administration of this Act in the Philippine Islands."

Sec. 21. That the first paragraph of section 4 of the World War Veterans' Act, 1924, be, and the same is hereby, amended to read as follows:

"SEC. 4. There is established an independent bureau under the President to be known as the United States Veterans' Bureau, the director of which shall be appointed by the President by and with the advice and consent of the Senate. The Director of the United States Veterans' Bureau shall receive a salary of \$12,000 per annum, payable monthly."

Approved, July 2, 1926.

[PUBLIC—No. 472—69TH CONGRESS]

[H. R. 10277]

An Act To amend the World War Adjusted Compensation Act.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That section 302 of the World War Adjusted Compensation Act is amended, to take effect as of May 19, 1924, to read as follows:

"SEC. 302. (a) A veteran may receive the benefits to which he is entitled by application claiming the benefits of this Act, filed with the Secretary of War, if he is serving in, or his last service was with, the military forces; or filed with the Secretary of the Navy, if he is serving in, or his last service was with, the naval forces.

"(b) Such application shall be made and filed on or before January 1, 1928, (1) personally by the veteran, or (2) in case physical or mental incapacity prevents the making or filing of a personal application, then by such representative of the veteran and in such manner as may be by regulations prescribed. An application made by a person other than the representative authorized by any such regulation, or not filed on or before January 1, 1928, shall be held void. If the veteran dies after the application is made and before it is filed it may be filed by any person: *Provided, however*, That if the veteran died between May 19, 1924, and July 1, 1924, without making the application, leaving a widow surviving him, the application may be made by the widow and shall be valid with the same force and effect in every respect as if the application had been made by the veteran.

"(c) If the veteran dies after the application is made, it shall be valid if the Secretary of War or the Secretary of the Navy, as the case may be, finds that it bears the bona fide signature of the applicant, discloses an intention to claim the benefits of this Act on behalf of the veteran, and is filed on or before January 1, 1928, whether or not the veteran is alive at the time it is filed. If the veteran dies and payments are made to his dependents under Title VI, and thereafter a valid application is filed under this section, then if the adjusted service credit of the veteran is more than \$50, payment shall be made in accordance with Title V, less any amounts already paid under Title VI.

"(d) The Secretary of War and the Secretary of the Navy shall jointly make any regulations necessary to the efficient administration of the provisions of this section."

SEC. 2. Section 303 of such Act is amended to read as follows:

"SEC. 303 (a) As soon as practicable after the receipt of a valid application the Secretary of War or the Secretary of the Navy, as the case may be, shall transmit to the Director of the United States Veterans' Bureau (hereinafter in this Act referred to as the Director) the application and a certificate setting forth—

"(1) That a valid application has been received;

"(2) That the applicant is a veteran;

"(3) His name and address;

"(4) The date and place of his birth; and

"(5) The amount of his adjusted service credit.

"(b) Upon receipt of such certificate the Director shall proceed to extend to the veteran the benefits provided for in Title IV or V."

SEC. 3. (a) Section 308 of such Act is amended, to take effect as of May 19, 1924, to read as follows:

"SEC. 308. No sum payable under this Act to a veteran or his dependents, or to his estate, or to any beneficiary named under Title V, no adjusted service certificate, and no proceeds of any loan made on such certificate shall be subject to attachment, levy, or seizure under any legal or equitable process, or to National or State taxation, and no deductions on account of any indebtedness of the veteran

to the United States shall be made from the adjusted service credit or from any amounts due under this Act."

(b) As used in this section the term "original credit" means the amount of the adjusted service credit computed under the World War Adjusted Compensation Act before its amendment by this Act, less amounts deducted on account of any indebtedness of the veteran to the United States; and the term "new credit" means the amount of the adjusted service credit computed under such Act as amended by this Act, without such deduction.

(c) If the veteran is alive at the time of the enactment of this Act and the benefits of the World War Adjusted Compensation Act have been extended to him, then any excess of the new credit over the original credit shall be considered as if it were a separate adjusted service credit and the benefits of such Act shall be extended in respect thereof according to the terms of such Act as amended by this Act.

(d) If the veteran has died before the enactment of this Act and before making application under section 302 of the World War Adjusted Compensation Act, then if any part of the original credit has been paid to the dependents of the veteran, any remaining part shall be paid as provided in Title VI of such Act as amended by this Act, and any excess of the new credit over the original credit shall be paid in cash in a lump sum to the dependents as provided in Title VI of such Act as amended by this Act.

(e) If the veteran has died before the enactment of this Act after having made application, then—

(1) If the original credit was not over \$50 and the new credit is not over \$50 payment shall be made as provided in subdivision (d).

(2) If the original credit was not over \$50 and the new credit is over \$50 then the face value of an adjusted service certificate computed on the basis of the new credit shall be paid to the beneficiary named, or, if the beneficiary died before the veteran and no new beneficiary was named or if no beneficiary was named in the application, then to the estate of the veteran. If in any such case any payments have already been made to the veteran or his dependents, the amount of such payments shall be deducted from the face value of the adjusted service certificate.

(3) If the original credit was over \$50 then the face value of an adjusted service certificate computed on the basis of the excess of the new credit over the original credit shall be paid as provided in paragraph (2) of this subdivision.

(f) Wherever under this Act or the World War Adjusted Compensation Act it is provided that payment shall be made by the Director of the United States Veterans' Bureau to the estate of any decedent, such payment, if not over \$500, may, under regulations prescribed by the Director, be made to the persons found by him to be entitled thereto, without the necessity of compliance with the requirements of law in respect of the administration of such estate.

SEC. 4. (a) Any person who charges or collects, or attempts to charge or collect, either directly or indirectly, any fee or other compensation for assisting in any manner a veteran, his dependents or other beneficiary under this Act, in obtaining any of the benefits, privileges or loans to which he is entitled under the provisions of this Act, shall, upon conviction thereof, be subject to a fine of not more than \$500, or imprisonment for not more than one year, or both.

(b) Such Act is amended by adding after section 309 a new section to read as follows:

"FINALITY OF DECISIONS"

"SEC. 310. The decisions of the Secretary of War, the Secretary of the Navy, and the Director, on all matters within their respective jurisdictions under the provisions of this Act (except the duties vested in them by Title VII) shall be final and conclusive."

SEC. 5. Section 503 of such Act is amended to read as follows:

"SEC. 503. No certificate issued or right conferred under the provisions of this title shall, except as provided in section 502, be negotiable or assignable or serve as security for a loan. Any negotiation, assignment, or loan made in violation of any provision of this section shall be held void. If any person is named as beneficiary by the veteran as a consideration for the making of a loan to the veteran by such person or any other person, such naming shall be void. Any person who accepts an assignment of a certificate or receives a certificate as security for a loan contrary to the provisions of this title, or who makes a loan to a veteran in consideration of the naming by the veteran of such person or any other person as beneficiary, shall be guilty of a misdemeanor and shall upon

conviction thereof be fined not more than \$500 or imprisoned not more than one year, or both."

Sec. 6. Section 601 of such Act is amended to read as follows:

"Sec. 601. If the veteran has died before making application under section 302, or, if entitled to receive adjusted service pay, has died after making application but before he has received payment under Title IV, then the amount of his adjusted service credit shall (as soon as practicable after receipt of an application in accordance with the provisions of section 604, but not before March 1, 1925) be paid to his dependents, in the following order of preference:

"(1) To the widow;

"(2) If no widow entitled to payment, then to the children, share and share alike;

"(3) If no widow or children entitled to payment, then to the mother;

"(4) If no widow, children, or mother, entitled to payment, then to the father."

Sec. 7. Section 602 of such Act is amended to read as follows:

"Sec. 602. (a) No payment under section 601 shall be made to a widow if she has remarried before making application, or if at the time of the death of the veteran was living apart from him by reason of her own willful act; nor unless dependent at the time of the death of the veteran or at any time thereafter and before January 2, 1928. The widow shall be presumed to have been dependent at the time of the death of the veteran upon a showing of the marital cohabitation.

"(b) Payment under section 601 shall be made to a child if (1) under 18 years of age at the time of the death of the veteran, or (2) at any time thereafter and before January 2, 1928, incapable of self-support by reason of mental or physical defect.

"(c) No payment under section 601 shall be made to a mother or father unless dependent at the time of the death of the veteran or at any time thereafter and before January 2, 1928. If at the time of the death of the veteran or at any time thereafter and before January 2, 1928, the mother is unmarried or over 60 years of age, or the father is over 60 years of age, such mother or father, respectively, shall be presumed to be dependent."

Sec. 8. Section 605 of such Act is amended to read as follows:

"Sec. 605. (a) As soon as practicable after the receipt of a valid application the Secretary of War or the Secretary of the Navy, as the case may be, shall transmit to the Director the application and a certificate setting forth—

"(1) That a valid application has been received;

"(2) The name and address of the applicant;

"(3) That the individual upon whom the applicant bases his claim to payment was a veteran;

"(4) The name of such veteran and the date and place of his birth; and

"(5) The amount of the adjusted service credit of the veteran.

"(b) Upon receipt of such certificate the Director shall proceed to extend to the applicant the benefits provided in this title if the Director finds that the applicant is the dependent entitled thereto."

Sec. 9. Section 607 of such Act is amended by striking out "and" at the end of subdivision (b), by striking out the period at the end of subdivision (c) and inserting a semicolon and the word "and", and by adding after subdivision (c) a new subdivision to read as follows:

"(d) The term 'widow' includes widower."

Sec. 10. Title VI of such Act is amended by adding at the end thereof a new section to read as follows:

"Sec. 608. If the veteran died while in the service and before July 1, 1919, and if an adjusted service credit has been or is, after this section takes effect, certified to the Director, then the sum of \$60 shall be paid in a lump sum to the dependents of such veteran in the same manner as is provided in sections 601 and 602 of this Act."

Sec. 11. This Act shall not invalidate any payments made or applications received under the World War Adjusted Compensation Act before the enactment of this Act. Payments under awards heretofore or hereafter made shall be made to the dependent entitled thereto regardless of change in status, unless another dependent establishes to the satisfaction of the Director a priority of preference under such Act as amended by this Act. Upon the establishment of such preference the remaining installments shall be paid to such dependent, but in no case shall the total payments under Title VI of such Act (except section 608) exceed the adjusted service credit of the veteran.

SEC. 12. Title VII of such Act is amended by adding at the end thereof a new section to read as follows:

"SEC. 704. Whoever falsely makes, forges, counterfeits, or alters, or causes or procures to be made, forged, counterfeited, or altered, or willingly aids or assists in falsely making, forging, counterfeiting, or altering an adjusted service certificate issued under authority of this Act, or whoever passes, utters, publishes, or sells, or attempts to pass, utter, publish, or sell, any such false, forged, counterfeited, or altered certificate, with intent to defraud the United States or any person, or whoever has in possession any such falsely made, forged, counterfeited, or altered certificate, with intent to unlawfully use the same, shall be punished by a fine of not more than \$5,000 and imprisonment not more than fifteen years. The Secretary of the Treasury is hereby authorized to direct and use the Secret Service Division of the Treasury Department to detect, arrest, and deliver into the custody of the United States marshal having jurisdiction any person or persons violating any of the provisions of this section."

SEC. 13. Title VII of such Act is further amended by adding at the end thereof a new section to take effect as of May 19, 1924, and to read as follows:

"SEC. 705. Whenever it appears to the Director, by evidence clear and satisfactory to him, that any adjusted service certificate has, without bad faith upon the part of the person entitled to payment thereon, been lost, destroyed, wholly or in part, or so defaced as to impair its value to the rightful holder, and such adjusted service certificate is identified by number and description, the Director shall under such regulations and with such restrictions as to time and retention for security or otherwise as he may prescribe, issue a duplicate thereof of like value in all respects to the original certificate and so marked as to show the original number of the certificate lost, destroyed, or defaced, and the date thereof. The lawful holder of such certificate who makes application for a duplicate shall surrender the original, if existing, or so much thereof as may remain and shall file in the United States Veterans' Bureau a bond in a penal sum of the face value of such lost, destroyed, or defaced certificate, with two good and sufficient securities, residents of the United States, to be approved by the Director, with condition to indemnify and save harmless the United States from any claim upon such lost, destroyed, or defaced certificate."

Approved, July 3, 1926.

[EXTRACT FROM PUBLIC LAW NO. 600, 69TH CONGRESS]

[H. R. 15959]

An Act Making appropriations for the Executive Office and sundry independent executive bureaus, boards, commissions, and offices for the fiscal year ending June 30, 1928, and for other purposes.

UNITED STATES VETERANS' BUREAU

For carrying out the provisions of an Act entitled "An Act to establish a Veterans' Bureau and to improve the facilities and service of such bureau and to further amend and modify the War Risk Insurance Act approved August 9, 1921," and to carry out the provisions of the Act entitled "World War Veterans' Act, 1924," approved June 7, 1924, as amended, and for administrative expenses in carrying out the provisions of the World War Adjusted Compensation Act of May 19, 1924, including salaries of personnel in the District of Columbia and elsewhere in accordance with the Classification Act of 1923, and expenses of the central office at Washington, District of Columbia, and regional offices and sub-offices, and including salaries, stationery, and minor office supplies, furniture, equipment and supplies, rentals and alterations, heat, light, and water, miscellaneous expenses, including telephones, telegrams, freight, express, law books, books of reference, periodicals, ambulance service, towel service, laundry service, repairs to equipment, storage, ice, taxi service, car fare, stamps and box rent, traveling and subsistence, including not to exceed \$4,000 for the expenses, except membership fees, of employees detailed by the director to attend meetings of associations for the promotion of medical science, and annual national conventions of such organizations as may be recognized by the director in the presentation or adjudication of claims under authority of section 500 of the World War Veterans' Act, as amended, including reimbursement to employees for similar travel heretofore authorized, from the appropriation for the fiscal year in which the travel was performed, and traveling expenses of employees transferred from one official station to another when incurred on the written order of the director, salaries and expenses of employees engaged in field investi-

gation, passenger-carrying and other motor vehicles, including purchase, maintenance, repairs, and operation of same, salaries and operating expenses of the Arlington Building and annex, including repairs and mechanical equipment, fuel, electric current, ice, ash removal, and miscellaneous items; and including the salaries and allowances, where applicable, wages, travel, and subsistence of civil employees at the United States veterans' hospitals, supply depots, dispensaries, and clinics, including the furnishing and laundering of white duck suits, and white canvas shoes to employees whose duties make necessary the wearing of same, \$42,500,000: *Provided*, That physicians, dentists, and nurses of the medical service of the United States Veterans' Bureau, in addition to their compensation, when transferred from one official station to another for permanent duty, may be allowed, within the discretion and under written order of the director, the expenses incurred for packing, crating, drayage, and transportation of their household effects and other personal property not exceeding in all 5,000 pounds.

Such portion of this appropriation as may be necessary shall be allotted from time to time by the United States Veterans' Bureau to the Public Health Service and shall be available for expenditure by the Public Health Service for necessary personnel, the pay and allowances and travel of commissioned officers of the Public Health Service detailed to the United States Veterans' Bureau for duty.

For printing and binding for the United States Veterans' Bureau, including all of its bureaus, offices, institutions, and services located in Washington, District of Columbia, and elsewhere, \$125,000.

Compensation: For the payment of military and naval compensation accruing during the fiscal year 1928 or in prior fiscal years for death or disability provided by the Act approved October 6, 1917, as amended, and the World War Veterans' Act, 1924, approved June 7, 1924, as amended, \$168,500,000.

Medical and hospital services: For medical, surgical, dental, dispensary, and hospital services and facilities, convalescent care, necessary and reasonable after-care, welfare of, nursing, prosthetic appliances (including special clothing made necessary by the wearing of prosthetic appliances prescribed by the bureau), medical examinations, funeral, burial, and other incidental expenses (including preparation for shipment and transportation of remains) accruing during the fiscal year 1928 or in prior fiscal years, traveling expenses, and supplies, and not exceeding \$100,000 for library books, magazines, and papers for beneficiaries of the United States Veterans' Bureau, court or other expenses incident to any investigation or court proceeding for the appointment or removal of any guardian, curator, conservator, or other person legally vested with the care of the claimant or his estate, or in connection with the administration of such estate by such fiduciaries, including court costs and other expenses incident to proceedings heretofore or hereafter taken for commitment of mentally incompetent persons to hospitals for the care and treatment of the insane, \$35,275,000.

This appropriation shall be disbursed by the United States Veterans' Bureau, and such portion thereof as may be necessary shall be allotted from time to time to the Public Health Service, and the War, Navy, and Interior Departments, and transferred to their credit for disbursement by them for the purposes set forth in the foregoing paragraph; and allotted and transferred to the Board of Managers of the National Home for Disabled Volunteer Soldiers for the purposes set forth in the foregoing paragraph, and such sums as are allotted to the Board of Managers shall be covered into the surplus fund of the Treasury.

No part of this appropriation shall be expended for the purchase of any site for a new hospital, for or toward the construction of any new hospital, or for the purchase of any hospital; and not more than \$3,500,000 of this appropriation may be used to alter, improve, or provide facilities in the several hospitals under the jurisdiction of the United States Veterans' Bureau so as to furnish adequate accommodations for its beneficiaries either by contract or by the hire of temporary employees and the purchase of materials.

The allotments made to the Public Health Service, War, Navy, and Interior Departments shall be available for expenditure for care and treatment of beneficiaries of the United States Veterans' Bureau, and for necessary minor repairs and improvements of existing facilities, under the various headings of appropriations made to said departments as may be necessary.

Adjusted service certificate fund: For an amount necessary under section 505 of the World War Adjusted Compensation Act of May 19, 1924, to provide for the payment of the face value of each adjusted service certificate in twenty years from its date or on the prior death of the veteran, \$112,000,000, to remain available until expended.

For military and naval insurance accruing during the fiscal year 1928 or in prior fiscal years, \$114,000,000.

Hospital facilities and services: For carrying out the provisions of the Act entitled "An Act to authorize an appropriation to provide additional hospital and out-patient dispensary facilities for persons entitled to hospitalization under the "World War Veterans' Act, 1924," approved March 3, 1925, \$1,000,000, to be immediately available and to remain available until expended.

SEC. 2. In expending appropriations or portions of appropriations, contained in this Act, for the payment for personal services in the District of Columbia in accordance with the Classification Act of 1923, the average of the salaries of the total number of persons under any grade in any bureau, office, or other appropriation unit shall not at any time exceed the average of the compensation rates specified for the grade by such Act, and in grades in which only one position is allocated the salary of such position shall not exceed the average of the compensation rates for the grade except that in unusually meritorious cases of one position in a grade advances may be made to rates higher than the average of the compensation rates of the grade but not more often than once in any fiscal year and then only to the next higher rate: *Provided*, That this restriction shall not apply (1) to grades 1, 2, 3, and 4 of the clerical-mechanical service, or (2) to require the reduction in salary of any person whose compensation was fixed as of July 1, 1924, in accordance with the rules of section 6 of such Act, (3) to require the reduction in salary of any person who is transferred from one position to another position in the same or different grade in the same or a different bureau, office, or other appropriation unit, or (4) to prevent the payment of a salary under any grade at a rate higher than the maximum rate of the grade when such higher rate is permitted by the Classification Act of 1923, and is specifically authorized by other law.

SEC. 3. This Act hereafter may be referred to as the "Independent Offices Act, 1928."

Approved, February 11, 1927.

[PUBLIC—No. 762—69TH CONGRESS]

[H. R. 16886]

An Act To authorize the Director of the United States Veterans' Bureau to make loans to veterans upon the security of adjusted service certificates.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That section 502 of the World War Adjusted Compensation Act is amended by adding at the end thereof the following new subdivisions:

"(i) The Director of the United States Veterans' Bureau is authorized, through such officers and at such regional offices, suboffices, and hospitals of the United States Veterans' Bureau as he may designate, and out of the United States Government life insurance fund established by section 17 of the World War Veterans' Act, 1924, as amended, to make loans to veterans upon their adjusted service certificates in the same amounts and upon the same terms and conditions as are applicable in the case of loans made under this section by a bank, and the provisions of this section shall be applicable to such loans; except that the rate of interest shall be 2 per centum per annum more than the rate charged at the date of the loan for the discount of ninety-day commercial paper under section 13 of the Federal Reserve Act by the Federal reserve bank for the Federal reserve district in which is located the regional office, suboffice, or hospital of the United States Veterans' Bureau at which the loan is made.

"(j) For the purpose of enabling the director to make such loans out of the United States Government life insurance fund the Secretary of the Treasury is authorized to loan not exceeding \$25,000,000 to such fund with interest at the rate of 4 per centum per annum (beginning on the date the check for each amount loaned to a veteran is paid by the Treasurer of the United States), compounded annually, on the security of bonds held in such fund.

"(k) The disbursing officers of the United States Veterans' Bureau shall be allowed credit in their accounts for all loans made in accordance with regulations and instructions of the director."

SEC. 2. That section 705 of the World War Adjusted Compensation Act, as amended, is amended by striking out the period at the end thereof and inserting in lieu thereof a comma, and the following: "except that a duplicate certificate

shall be issued without the requirement of a bond when it is shown to the satisfaction of the director that the original certificate, before delivery to the veteran, has been lost, destroyed, wholly or in part, or so defaced as to impair its value.'

SEC. 3. That the last paragraph of paragraph (7) of section 202 of the World War Veterans' Act, 1924, as amended, is hereby repealed.

Approved, March 3, 1927.

[PUBLIC—No. 784—69TH CONGRESS]

[S. 5625]

An Act To provide for continued hospitalization at Saranac Lake, New York, of certain beneficiaries of the Veterans' Bureau.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That the Director of the United States Veterans' Bureau is authorized and directed to enter into such contracts as may be necessary to provide for the continuance (during such periods as they may be entitled to medical, surgical, and hospital services under the World War Veterans' Act, 1924, as amended) of such services in other than governmental institutions at Saranac Lake, New York, for those beneficiaries of the Veterans' Bureau who now receive such services there.

Approved, March 4, 1927.

[PUBLIC—No. 785—69TH CONGRESS]

[S. 5624]

An Act To provide for continued hospitalization at Liberty, New York, of certain beneficiaries of the Veterans' Bureau.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That the Director of the United States Veterans' Bureau is authorized and directed to enter into such contracts as may be necessary to provide for the continuance (during such periods as they may be entitled to medical, surgical, and hospital services under the World War Veterans' Act, 1924, as amended) of such services in other than governmental institutions at Liberty, New York, for those beneficiaries of the Veterans' Bureau who now receive such services there.

Approved, March 4, 1927.

INDEX

	Page
Adjudication activities, uniform system of supervision.....	34
Adjusted compensation.....	43
Act, amendments to, and most important provisions.....	6
Act, an act to amend.....	145
Action taken on applications for, fiscal year 1927, Table No. 70.....	124
Applications received, by fiscal years, Table No. 69.....	124
Death claims awarded on account of adjusted-service certificates, Table No. 71.....	124
Admissions:	
By beneficiary and groups of hospitals, Table No. 15.....	68
By branch of service and type of admissions, Table No. 16.....	69
By fiscal years 1920-1927, Table No. 14.....	67
Hospital, analysis of.....	28
To veterans' hospitals, by hospital, Table No. 27.....	86
United States veterans, by branch of service, type of patient, and sex and color, Table No. 18.....	70
United States veterans with nonservice-connected disabilities, Table No. 17.....	70
Under authority of paragraph 10, section 202, World War veterans' act, analysis of.....	28
Advisory group on appeals, purpose of.....	46
Appeals. (See Central Board of Appeals.)	
Appropriations:	
Analysis, obligations from all, Table No. 74.....	128
Disbursements made from, Table No. 75.....	129
For the Veterans' Bureau, an act making.....	148
Versus disbursements, Table No. 73.....	126
Automatic insurance. (See Insurance.)	
Average days' hospitalization. (See Tables Nos. 26, 27, 28, 30, and 31).....	83-88, 91
Awards:	
Active, rerating under new schedule for disability ratings.....	1
Compensation. (See Compensation awards.)	
Insurance. (See Insurance awards.)	
Bacteriology, serology, and chemistry courses given at postgraduate school of neuropsychiatry.....	11
Beds, occupied, unoccupied, and available, by type, Table No. 13.....	66
Beneficiary:	
Class of, of patients admitted to hospitals, fiscal year 1927, Table No. 15.....	68
Class of, of patients discharged during fiscal year 1927, Table No. 25.....	82
Class of, of patients remaining under treatment, Table No. 20.....	72
Relationship of, to claimant in compensation active disability awards, Table No. 38.....	99
Relationship of, to deceased veteran, in compensation active death awards, Table No. 39.....	99
Bond investments of United States Government life-insurance fund, Table No. 68.....	123
Business management of hospitals.....	26
Cardiovascular study by medical research.....	11
Cause of death, primary, of patients, fiscal years 1924-1927, Table No. 29.....	89
Central board of appeals:	
Cases disposed of, by sections of central board and appeal group on central office cases, Table No. 72.....	125
Changes in organization.....	44

Claims:

Compensation. (<i>See</i> Compensation claims.)	
Insurance. (<i>See</i> Insurance claims.)	
Colored patients, Table No. 31 (<i>also see</i> Sex and color)-----	91
Committee on recoveries-----	44
Compensation:	
Activities, reorganization of-----	34
Active disability cases, showing extent and degree of impairment, number and amount of monthly payment, Table No. 37)-----	95
Adjusted. (<i>See</i> Adjusted compensation.)	
Compensation awards:	
Death, active, by relationship of beneficiary to deceased veteran, Table No. 39-----	99
Death, active, showing kind of claim and number and amount of monthly payment, Table No. 40-----	100
Death, analysis of-----	37
Death and disability, by fiscal years, Table No. 34-----	93
Disability, active, analysis of-----	35
Disability, active, by beneficiary relationship, Table No. 38-----	99
Disability, active, showing classification of major disability and extent by fiscal years, Table No. 36-----	94
Disability, average monthly disbursement for-----	36
Disability, by fiscal years, Table No. 34-----	93
Disability, each month, January, 1919-July, 1927, Chart No. 2, facing-----	34
Terminated during fiscal year, analyzed as to reason for termination, Table No. 35-----	93
Compensation claims:	
Death and disability, received, fiscal years 1918-1927, Table No. 33--	93
Regional activities in, Table No. 32-----	92
Construction:	
Division; activities and accomplishments-----	55
Hospital, facilities existing and development of, under present appro- priations, Table No. 76-----	131
Hospitals, future-----	22
Projects, accomplishments on-----	55
Converted insurance. (<i>See</i> Insurance.)	
Cost of application of disability rating schedule-----	35
Death and disability compensation awards. (<i>See</i> Compensation awards.)	
Death and disability compensation claims. (<i>See</i> Compensation claims.)	
Death and disability insurance awards. (<i>See</i> Insurance.)	
Death claims awarded on account of adjusted service certificates, Table No. 71-----	124
Death compensation awards. (<i>See</i> Compensation awards.)	
Deaths:	
Analysis of-----	38
In hospitals, by fiscal years 1924-1927, showing primary cause, Table No. 29-----	89
Dental relief-----	23
Diagnostic centers: Analysis of accomplishments, functions of-----	13
Directors Advisory Group on Appeals, purpose of-----	46
Disability and death insurance awards. (<i>See</i> Insurance awards.)	
Disability compensation awards, active. (<i>See</i> Compensation awards.)	
Disability compensation cases, active, showing extent and degree of im- pairment, number, and amount of monthly payment, Table No. 37-----	95
Disability compensation claims received during fiscal years 1918-1927, Table No. 33-----	93
Disability compensation of insane veterans, as reduced by paragraph 7, section 202, World War veterans' act, 1924-----	36
Disability rating schedule, cost of application-----	35
Disability ratings, schedule of rerating of active awards-----	1
Disbursements:	
From all appropriations during fiscal year-----	53
Increased and decreased-----	5
Made from all appropriations, by fiscal years, Table No. 75-----	129
Percentage, distribution during fiscal year-----	54
Versus appropriations, Table No. 73-----	126

Discharges:	Page
By class of beneficiary and groups of hospitals, Table No. 25.....	82
By class of disease and disposition, or condition on disposition, Table No. 26.....	83
By disposition and type of patient, showing average days hospitalized, Table No. 28.....	88
Colored patients, by general class of disease, Table No. 31.....	91
Female patients, by general class of disease treated, Table No. 30.....	91
From U. S. Veterans' hospitals, by hospital, Table No. 27.....	86
General medical and surgical patients, analysis of.....	33
Hospital, analysis of.....	31
Neuropsychiatric patients, analysis of.....	32
Pulmonary tuberculosis patients, analysis of.....	31
Disease, class of, of patients discharged during fiscal year, Table No. 26.....	83
Dividends paid on United States Government life insurance.....	43
Equipment and supplies, purchase, distribution and handling of.....	57
Examination and treatment facilities in dispensaries.....	9
Examinations:	
Medical and dental, salary and fee, Table No. 9.....	64
Out-patient, by kind and fiscal years, Table No. 6.....	63
Physical, in field stations.....	12
X ray, in hospitals and dispensaries, Tables Nos. 3 and 4.....	63
Exhibits of medical service at conventions.....	9
Expenditures and operating costs at United States veterans' hospitals.....	20
Expenditures for direct benefits to beneficiaries, decrease in.....	5
Facilities, hospital. (See Hospital facilities.)	
Farm activities, development of, neuropsychiatric hospitals.....	18
Female patients discharged from hospitals during fiscal year, Table No. 30. (See also Sex and color).....	91
Field stations and regional offices.....	11
Finance:	
Analysis of obligations from all appropriations, Table No. 74.....	128
Appropriations versus disbursements, Table No. 73.....	126
Disbursements made from all appropriations, by fiscal years, Table No. 75.....	129
Service, activities.....	53
Financial statement of United States Government life-insurance fund by calendar years, Table No. 67.....	122
Follow-up and contact of paroled neuropsychiatrics.....	20
Follow-up nurses from regional offices.....	12
General medical and surgical patients:	
Admitted, Tables Nos. 15, 16, and 18.....	68, 69, 70
Analysis of discharges of.....	33
Discharged, Tables Nos. 25, 26, 28, 30, and 31.....	82, 83, 88, 91
Increase in load.....	14
Remaining, Tables Nos. 20, 22, and 23.....	72, 74, 77
Guardianship:	
Activities.....	49
Activities in regional offices.....	52
Perfecting of procedure to secure adequate protection for wards.....	3
Heliotherapy in tuberculosis hospitals in the North.....	9
Home address of patients remaining under treatment:	
By groups of hospitals, Table No. 22.....	74
Showing State in which patient is hospitalized, Table No. 24.....	78
Home State, number of patients hospitalized in, by fiscal years, 1923-1927, Table No. 23.....	77
Hospital admissions. (See Admissions.)	
Hospital construction and facilities.....	2
Hospital construction, future.....	22
Hospital discharges. (See Discharges.)	
Hospital facilities:	
Additional appropriations for, under Public, No. 600.....	7
Existing and development of, under present appropriations, Table No. 76.....	131
Government.....	21
Hospital statistics.....	27

	Page
Hospitalization, average period of, see Tables Nos. 26, 27, 28, 30, and 31.	83-88, 91
Hospitalization of certain beneficiaries at Liberty, N. Y., an act to provide for	151
Hospitalization of certain beneficiaries at Saranac Lake, N. Y., an act to provide for	151
Hospitals:	
Approval of, by American College of Surgeons	9
Business management of	26
For general medical and surgical patients	14
For neuropsychiatric patients	17
For tuberculosis patients	15
Insurance:	
Activities	40
Automatic—	
Active disability and death awards showing amount of insurance in force, Table No. 46	105
Terminated disability and death awards, showing reason for termination, Table No. 47	105
Awards—	
Active, death and disability, automatic insurance, Table No. 46	105
Active, death and disability, term insurance, Table No. 44	103
Death and disability, United States Government term and converted, by fiscal years 1918-1927, Table No. 43	102
Term and automatic, analysis of	39
Terminated, death and disability, automatic insurance, by reason for termination, Table No. 47	105
Terminated, death and disability, term insurance, by reason for termination, Table No. 45	104
United States Government, term and converted, death and disability, by fiscal years 1918-1927, Table No. 43	102
Bond investments of United States Government life insurance fund, Table No. 68	123
Campaign to acquaint veteran with right to reinstate or convert	2
Claims awarded, converted insurance—	
By cause of disability, Table No. 53	111
By class of disability causing death, Table No. 52	110
Death, Table No. 48	106
Disability, Table No. 49	107
Claims received, United States Government term and converted, by fiscal years 1918-1927, Table No. 42	102
Claims terminated—	
Converted insurance, on account of death of insured, by class of disability, Table No. 54	112
Converted insurance, on account of death of insured, by plan of insurance, Table No. 50	108
Converted insurance, on account of recovery, by cause of disability, Table No. 55	114
On account of recovery, converted insurance, disability, Table No. 51	109
Claims, yearly renewable term, liability under, commuted value, June 30, 1927, Table No. 56	115
Converted—	
Death claims awarded, by class of disability causing death, Table No. 52	110
Death claims awarded during calendar year, by plan of insurance, Table No. 48	106
Disability claims awarded, by cause of disability, Table No. 53	111
Disability claims awarded during calendar year, by plan of insurance, Table No. 49	107
Disability claims terminated during calendar year on account of recovery, by plan of insurance, Table No. 51	109
Disability claims terminated on account of death of insured, by class of disability, Table No. 54	112
Disability claims terminated on account of death of insured, by plan of insurance, Table No. 50	108

Insurance—Continued.

	Page
Converted—Continued.	
Disability claims terminated on account of recovery, by cause of disability, Table No. 55	114
Policies, life, in force, Chart No. 3	42
Death claims awarded, converted insurance—	
By class of disability causing death, Table No. 52	110
By plan of insurance, Table No. 48	106
Disability claims awarded, converted insurance—	
By cause of disability, Table No. 53	111
By plan of insurance, Table No. 49	107
Disability claims terminated, converted insurance—	
On account of death of insured, by class of disability, Table No. 54	112
On account of death of insured, by plan of insurance, Table No. 50	108
On account of recovery, by cause of disability, Table No. 55	114
Disability claims terminated during calendar year on account of recovery, by plan of insurance, Table No. 51	109
Financial statement, United States Government Life Insurance fund, by calendar years, Table No. 67	122
Term—	
Active disability and death awards, showing amount of insurance in force, Table No. 44	103
Right to reinstate	2
Terminated disability and death awards, showing reason for termination, Table No. 45	104
United States Government life—	
Applications and policies, analysis of	41
Bond investments of fund, Table No. 68	123
Financial statement of fund, by calendar years, Table No. 67	122
Fund, policy loans, Table No. 66	121
In force	42
All plans, Table No. 57	116
Endowment at age 62, Table No. 63	119
Endowment, 20-year, Table No. 61	118
Endowment, 30-year, Table No. 62	118
Extended insurance, Table No. 65	120
Five-year convertible term, Table No. 64	119
Ordinary life, Table No. 58	116
20-payment life, Table No. 59	117
30-payment life, Table No. 60	117
United States Government term and converted—	
Claims received by fiscal years, 1918–1927, Table No. 42	102
Death and disability awards, by fiscal years, 1918–1927, Table No. 43	102
Yearly renewable, analysis of	41
Investments, bond, of United States Government life-insurance fund, Table No. 68	123
Laboratory tests, clinical, in United States veterans' hospitals and dispensaries, Tables Nos. 1 and 2	62
Legal and guardianship activities in regional offices	52
Legal service, activities of	47
Legislation, new, most important provisions of	6
Liability under yearly renewable term insurance claims, Table No. 56	115
Liberty, N. Y., an act to provide for the hospitalization of certain beneficiaries	151
Life insurance. (<i>See</i> Insurance.)	
Life insurance, policies, converted, in force, Chart No. 3	42
Loans on adjusted service certificates authorized by amendatory legislation	1
Loans on adjusted service certificates authorized under Public, No. 762	7
Loans to veterans, an act authorizing the director to make loans	150
Medical council, meetings of, and subjects considered	9
Medical, legal, and occupational consultants, establishment of board	35
Medical research, organizations and functions of	10

	Page
Medical research problems completed by hospitals, field service, and central office	10
Medical service rendered in regional offices, suboffices	12
Military and naval compensation, increase in disbursements	5
Monthly payment:	
Compensation, active disability awards, Tables Nos. 36 and 38.....	94, 99
Compensation, active disability cases, Table No. 37.....	95
Compensation, active death awards, Table No. 39.....	99
Movement of patient population, Table No. 27	86
Neuropsychiatric bed demand, readjustments to meet	17
Neuropsychiatric patients:	
Admitted, Tables Nos. 15, 16, and 18.....	68, 69, 70
Analysis of discharges of patients.....	32
Discharged, Tables Nos. 25, 28, 30, and 31.....	82, 88, 91
Hospitals for.....	17
Provisions for, in general hospitals.....	18
Remaining, Tables Nos. 20, 22, and 23.....	72, 74, 77
Neuropsychiatric, social work, functioning of	18
Neuropsychiatry, postgraduate course in, at United States Veterans' Hospital, Bronx, N. Y.	8
Nomenclature for general medical and surgical diseases, progress in work upon	10
Nurses, follow-up and social workers, home visits of	12
Nursing activities, regional, Table No. 11	65
Objectives of medical service during fiscal year	8
Objectives of the Veterans' Bureau during fiscal year	1
Occupational therapy, showing hours given to each subject, Table No. 12	65
Operating costs and expenditures in United States Veterans' hospitals	20
Operations, surgical, number performed in hospitals during fiscal year, Table No. 27	86
Organizational and procedural changes	4
Out-patient medical service, by fiscal years, Table No. 5	63
Paragraph 10, section 202, World War veterans act, 1924, admissions, Table No. 17	70
Patients. (See Admissions, discharges, turnover, and replacement, remaining, deaths, and operations, surgical.)	
Payments, monthly, to dependents for compensation active death awards, Table No. 40	100
Percentage distribution of disbursements during fiscal year	54
Personnel, Chart No. 4 facing.....	58
Personnel activities	58
Personnel, by location, aggregate annual salaries, together with net increase or decrease for fiscal year, Table No. 77	133
Personnel, by location, estimated annual salaries of per diem and per hour employees, Table No. 78	134
Physicians and dentists, bureau, affiliation with State and local organizations	8
Physiotherapy activities, Table No. 10	64
Policies, converted life insurance, Chart No. 3 facing.....	42
Policies, United States Government life, surrendered for cash and paid-up insurance	42
Policy loans, United States Government life-insurance fund, Table No. 66	121
Postgraduate school of neuropsychiatry, courses given	8
Premium income, United States Government life insurance	42
Procedural and organizational changes	4
Prosthetics	24
Psychotic beneficiaries not legally committed, procedure for release of	18
Psychotic patients, effort to provide adequate hospital accommodations for	3
Psychotic patients, results of treatment in the hospital, Bronx, N. Y.	19
Public:	
No. 448, extracts from.....	137
No. 472, extracts from.....	145
No. 762, extracts from.....	150
No. 784, extracts from.....	151
No. 785, extracts from.....	151

	Page
Public Law, No. 600, extracts from-----	148
Pulmonary tuberculosis:	
Analysis of discharges of patients-----	31
Arrested—	
Cost of statutory award for-----	36
Payment of statutory award under amendment to section 202 (7)-----	2
Preparation of field instructions interpretive of the amendment regarding-----	8
Provisions for, in new legislation-----	6
Valuable advisory aid given by nationally recognized specialists-----	15
Pulmonary tuberculosis patients:	
Admitted, Tables Nos. 15, 16, and 18-----	68, 69, 70
Discharged, Tables Nos. 25, 28, 30, and 31-----	82, 88, 91
Remaining, Tables Nos. 20, 22, and 23-----	72, 74, 77
Purchase, distribution, and handling of equipment and supplies-----	57
Rating activities, adjudication service-----	34
Rating schedule, disability, cost of application of-----	35
Recoveries, committee on-----	44
Regional offices and allied field stations-----	11
Rehabilitation activities, by fiscal years, Table No. 41-----	38, 101
Rehabilitation, discharge of responsibilities in regard to-----	4
Relief, dental-----	23
Relief of World War veterans, laws enacted for, during fiscal year-----	137
Remaining patients:	
By class of beneficiary and groups of hospitals, Table No. 20-----	72
By fiscal years showing number of patients hospitalized in their home State by type of patient, Table No. 23-----	77
By home address and type of patient, Table No. 22-----	74
By sex and color, and fiscal year, Table No. 21-----	73
In all hospitals, October, 1919–July, 1927, Chart No. 1-----facing--	30
In veterans' hospitals, by hospital, Table No. 27-----	86
Research, medical. (See Medical research.)	
Results of treatment. (See Discharge tables.)	
Salaries, aggregate annual, of personnel by location, Table No. 77-----	133
Salaries, estimated, of per diem and per hour employees, Table No. 78--	134
Saranac Lake, N. Y., an act to provide for the hospitalization of certain beneficiaries at-----	151
Sex and color:	
Of patients admitted to hospitals, fiscal year 1927, Table No. 18-----	70
Of patients remaining under treatment, fiscal years 1923–1927, Table No. 21-----	73
Social work-----	25
Among paroled neuropsychiatric patients-----	17
Statistics, hospital-----	27
Supplies, purchase, distribution, and handling-----	57
Supply service-----	57
Surgical operations:	
Analysis of results-----	33
Number performed in hospitals during fiscal year, Table No. 27-----	86
Term insurance. (See Insurance.)	
Terminated compensation awards. (See Compensation awards.)	
Terminated insurance awards. (See Insurance.)	
Tests, laboratory, in United States veterans' hospitals and dispensaries, Tables Nos. 1 and 2-----	62
Transfers for further treatment. (See Discharge tables.)	
Treatments:	
In-patient. (See Admissions, discharges, and remaining.)	
Medical and dental, salary and fee, Table No. 8-----	64
Out-patient, by kind and fiscal years, Table No. 7-----	64
Tuberculosis, pulmonary. (See Pulmonary tuberculosis.)	
Turnover in United States veterans' hospitals, by hospital and fiscal years, Table No. 19-----	71
United States Government life insurance. (See Insurance.)	

