

April 16, 1927.

Name [REDACTED]

History - Personal and Marital

Age 25.

Born Sebring, Ky. October 19, 1902

Married for 4 years. Has 2 children, one 3 years old, the other 11 months.

Employment

Was reared on farm, and worked thus till about 18 years of age. Then began construction work on roadway as foreman. Worked thus 4 or 5 years. Then began working for Standard Oil Company in tetra-ethyl lead manufacturing plant. Was employed as helper, pumping Ethyl Chloride, for several weeks, then handled alloy, 2 or 3 weeks, then as "shift-breaker" on stills a short time. Became ill while on this work. He reports that there was a continual odor of $Pb(Et)_4$ around and in the plant, that the supply of gloves and masks was inadequate, and that the exposure was considerable most of the time. The ventilation too was faulty.

Subject was in hospital about 3 weeks, and then was out of hospital for 2 months before undertaking any work. Was employed in laboratory about 2 months, thereafter, but really worked very little. In March or April went to work on pressure stills, being put on shift work, to which he objected because of inability to sleep. Worked thus until July 1925. Could not stand work so quit. Remained in Elizabeth with no employment for about 1 month. Then was employed by G.W. Murray Co., Elizabeth for 2 weeks. Then in shipping department of Simmons Bed Co., for 3 or 4 weeks.

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Returned to Hanson in December 1925 and has remained here since. Has not been working except occasionally around home.

Family History - Insignificant.

Previous illnesses - None. Has always been healthy. No syphilis or gonorrhoea.

Present Illness - Began in September 1925. At that time had nausea, vomiting, sleeplessness, disturbing dreams, pains in back of head, nosebleed, frequent urination, and poor appetite.

Was sent to Reconstruction Hospital, New York city, and was seen by Dr. Touard. After 3 weeks was discharged, and was asked to return for examination. Did so three times. Frequent nose bleeding gave trouble, so was sent to specialist in Elizabeth by Standard Oil Co. Treatment unsatisfactory, for trouble continued.

Even after some months of no employment his condition was not good in that violent pains in head continued, and his nose bled frequently. For this reason quit work and returned home to Hanson. Has been under care of Dr. J. D. Timmons, Hanson, Ky., since being at home.

At present he is disturbed by inconstant pains in back of head and back. He has nose bleed every few days, though less frequent than before. He is nervous and easily excited, and fatigued. His eyes seem less strong than before, burning after short period of reading, and his memory is not good. There has been no sexual change. In fact he has a baby eleven months of age. He has been gaining in weight over several months. He still notices frequency of urination. Appetite is fair.

Physical Examination

The subject is healthy and strong in appearance, with good color, tendency to obesity, and well developed muscles. He is cheerful, answers questions readily and is apparently not expecially ner-

vous, on examination or questioning. The only evidence of excitement is a tendency to chew the nails. As these are not chewed down as is the case with most persons having this nervous habit, it is quite questionable whether this is an habitual performance.

Weight (statement of patient) 185. Temperature - 99.4

Pulse - variable and unstable - 88 to 120.

Respiration - 20

Blood Pressure 146-96

The skin is generally in fair condition but the legs show the usual scarring from refinery furunculosis. There is a very marked dermatographia with edema.

The eyes react normally to light and accommodation, and the extrinsic muscles are normal. Vision is apparently normal.

The ears show no pathological condition.

The nose shows a redness and edema of the mucous membrane, with a deviation of the septum to the right, and a spur on the left. Both inferior turbinates are enlarged, especially the right. On transillumination the left face is dark in the region of the antrum. (Patient has slight fever, probably referable to nasal condition - common cold?)

The throat is red and edematous, the tonsils irregular, and cryptic. The left appears to be scarred as though abscessed at one time (no history).

The teeth are in wonderfully good condition.

The lymph glands are generally normal, but the posterior cervical on the left are palpable and tender.

The heart is apparently normal, the sounds being pure and of good quality. There is a marked sinus arrhythmia. The left border is 11.5 cm from the midline in 5th interspace.

The abdomen tends to pendulousness, and is difficult to examine. The muscles react vigorously. The liver and spleen are not palpable. There are no masses and no pain.

The Central Nervous System shows some degree of irritation. The reflexes are increased and there are tremors of the hands and the eyelids. These are inconstant, and increased on observation.

Laboratory Examination

Urine - Albumin negative
Sugar negative.

Blood - Leucocytes 11,000
Polymorphonuclears - 60%
Haemoglobin - 90 Talquist
No stippling of erythrocytes.
(Very finely stippled in way not characteristic of lead)

Discussion

The subject of this examination says he believes he is permanently disabled.

I cannot find any physical disability which is directly referable to lead, and the symptoms of headache and nosebleed are capable of being produced by a sinus infection, which exists..

Almost the only symptoms are subjective, and these must be taken for what they are worth. The slight nervous irritability is such as has been seen in a number of these men, and is no greater than is often seen in the course of a physical examination of apparently normal men. It is my opinion that he would recover from even such symptoms as he describes under proper care.

The general physical appearance of the man does not suggest even slight illness, and it is questionable if he would make any impression on a jury. He seems to feel, however, that he has been injured, that

he is still disabled, and that since the other men have been compensated, he also should be.

Note:-

I must confess, that in spite of a considerable scepticism about this whole group of cases, and in spite of every warning from my knowledge of the legal activities and the prejudices that have grown out of the whole affair, I cannot but feel that this man describes symptoms which he believes originated from his injury. This leads me to believe that he would probably impress a jury similarly.

A conference with the local physician, Dr. Timmons, failed to disclose any further information, beyond certain facts as to the general good repute of the man in the community. Dr. Timmons has not examined Mr. [REDACTED] but has treated him for nosebleed on several occasions. He has given no further treatment. He believes the patient is honest, and thus thinks it likely that his disability is real and due to his injury at Bayway. He believes that Mr. [REDACTED] thinks himself much worse than he really is.