



A Subsidiary of Union Pacific Corporation

INTER-OFFICE CORRESPONDENCE

TO: R. A. Loveless

OFFICE: C.C.Refinery

FROM: J. W. Bryant

DATE: 6/9/86

SUBJECT: Medical Services--Physician Retainers

I have reviewed your memo of May 30, 1986 and concur that a better relationship should exist between a "retained" physician and Champlin. I don't know all the reasons for this deteriorating relationship and wonder if, again, you and I should meet with Dr. Craig.

Should we both conclude that we need to seek a new industrial medical referral service, then we can do so. I would also propose that you identify three to five services and appropriate recommendations with supporting references.

J. W. Bryant

sjk

Attach.

cc: ~~J. E. Gay~~ (w/attach)

R. E. Schneck (w/attach)



MAY 2 1986

TO: J. W. Bryant OFFICE: Safety

FROM: R. A. Loveless DATE: May 30, 1986

SUBJECT: Company Physician Status

January 1985 Following Carlos Flores' injury, Dr. Craig recommended Dr. Berestain for referral contrary to the preferred specialist list which we provided him. He insured us that we would be satisfied with the treatment rendered however, problems developed concerning patient status and future prognosis.

October 1985 Douglas Boone received a strain to his lower back muscle - sent to Dr. Craig. Dr. Craig returned him to work with light duty. Dr. Craig was instructed of Champlin's policy regarding light duty.

December 1985 Anthony Dreier and Amador Elizondo Aromatic blood work in excess of normal range - Kathryn consulted with Dr. Craig and was told by him to refer them to their personal physicians. Later when I spoke to him he denied telling Kathryn this and indicated he had told her to refer them to a hematologist.

January 1986 Charles Blair received a back injury at work and was sent to see Dr. Craig. Sent back to work with light duty RTW slip. Again Dr. Craig was instructed that we have no light duty.

March 1986 Charles Bartosh Initial treatment in office questionable by Gloria. The remaining treatment and dressing changes left to Health Services with no physician follow-up.

April 1986 Elmer Hamilton fractured hand at home. Cast applied by Dr. Craig who felt he could continue to work with some restrictions. Again I instructed him that we have no light duty.

April 1986 Pascual Martinez Prospective employee with the Pipeline department - his pre-employment physical was conducted by Dr. Hammer because Dr. Craig was on vacation. He recommended we hire the individual prior to his review of the X-ray report, however rescinded the order when we brought the report to his attention. Dr. Craig returned and

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J. W. Bryant
Company Physician Sta. 15
May 30, 1986

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Pascual Martinez (Cont'd)

indicated that the X-ray report was misleading and recommended we hire him after refusing to refer him to an Orthopedic surgeon. We opted to refer despite his recommendation and the report from Dr. Yanez indicated that the man had a Class V back which is unemployable for labor jobs.

May 1986

Morris Jerauld Injury to toe nail at work - seen by Dr. Hammer because Dr. Craig was on vacation. Dr. Hammer felt Morris should stay off of work. Health Services felt he could have continued to work. Dr. Craig saw Morris when he returned from vacation and concurred with Dr. Hammer's prognosis which was considered overly conservative. ✓

As you can see from this chronology, problems with return to work status have continued despite our efforts to remedy the situation and Dr. Craig has become more reluctant to cooperate with us. The recent incident with Pascual Martinez reflects an attitude which will most certainly have a negative impact on our program if allowed to continue. Had we opted to follow his advice on this case the potential for further injury following employment would certainly exist.

Other problems have developed with Dr. John Hammer who provides health care while Dr. Craig is on vacation, which I might add has occurred with increasing regularity in recent months. His inaccurate diagnosis and overly conservative approach is detrimental to the successful administration of our health care program.

Therefore, considering these facts coupled with my increasing lack of confidence in his abilities, I feel it is necessary to seek another physician. With your approval I will begin the search within the local medical community for an occupational health physician who will better serve our intended purpose.

If you have any questions, please advise.


R. A. Loveless

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