

UNION CARBIDE CORPORATION
437 MAC CORKLE AVE. SOUTH CHARLESTON, W. VA. 25303
LAW DEPARTMENT

July 12, 1982

Dr. Gabriel Al-Hajj
4502 MacCorkle Avenue, S. W.
South Charleston, WV 25303

Re: Ernest Lee Stevens
SS No. 234-34-0503
Birth Date: 4-28-22

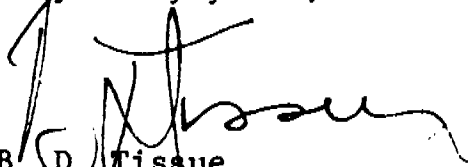
Dear Dr. Al-Hajj:

My information indicates that you are the attending physician/surgeon with respect to treatment which has been rendered Mr. Ernest Lee Stevens of North Charleston, West Virginia.

I enclose a medical authorization which would permit you to release all of the medical records you have pertaining to your treatment and care of Mr. Stevens.

Please forward all of such records to me at the above address along with a statement covering your reasonable costs in connection with the duplication of such records and I shall remit by return mail.

Very truly yours,


B. D. Tissue

BDT/sj

Enclosure

UCC 098176

RECEIVED

NAME Ernest L Stevens

JUL 19 1982

AGE 58

DATE 11/17/80

ADDRESS 311 32nd. St.

LAW
DEPARTMENT

4/28/22

RESPONSIBLE PARTY Self

Charleston, W.Va. 25312

TELEPHONE 744-4489

EMPLOYMENT: Disabled

REFERRING PHYSICIAN: Merrifield

INSURANCE: Med. 234-34-0503-A

CHIEF COMPLAINT: Sigmoidoscopy

FAMILY HISTORY: No TB cancer or diabetes in family

PAST HISTORY: Hemorrhoidectomy-no illness-ALLERGIC TO ASPIRIN

PRESENT ILLNESS:

Rectal bleeding fresh &
occasional dark blood.
Sif and up to 16 c in a bowl.
A crossing - bloody intermittent
R+ nitrofurantoin 2 H
Proctoflon HCL
Artifex cream

UCC 098177

7/29 (8)

anal enlarged bleed
hypoid projection at
se date line Bx + the
w/it require exam

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

SURGICAL PATHOLOGY EXAMINATION

PATHOLOGY ASSOCIATES, LTD.
SUI. 25 3 & 4 BROOKS MEDICAL BUILDING
CHARLESTON, WEST VIRGINIA 25301

PATHOLOGY ASSOCIATES LABORATORY
(204) 344-7000

Tissue No. 894-SB-81

Date 7-31-81

Name Stevens, Ernest

Age/Sex 4-28-22/Male

Doctor Shabb

Room No. OP

Specimen Submitted RECTAL BIOPSY

GROSS:

Grey-white fragments comprising a mound measuring 0.1 cm.

EAH/bh

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ORDER"

DIAGNOSIS:

Biopsy of rectum showing extensive acute inflammation and granulation tissue, otherwise unremarkable.

TSL/bh

UCC 098178


T. S. LANAVA, M.D.
PATHOLOGIST


E. A. HANSBARGER, JR., M.D.
PATHOLOGIST

PATIENT # 3001 STEVENS ERNEST L
 H.S. THOMAS MEMORIAL HOSP. 08/20/81 19:20 HRS
 58VPS MALE DR. AL-HAJJ/SHABB (25)

NO. AND SINUS RHYTHM RATE 60
 NORMAL ECG.

Agree with above.
 No change since 10-6-80.

tp/wh

INTERVALS IN MS.				FRONTAL PLANE ANGLES IN DEGREES			
P-R	Q-T	Q-Tc	T	QRS	T	T	J
136	84	377	4-1	30	40	13	9 NONE

TECH ID-7123

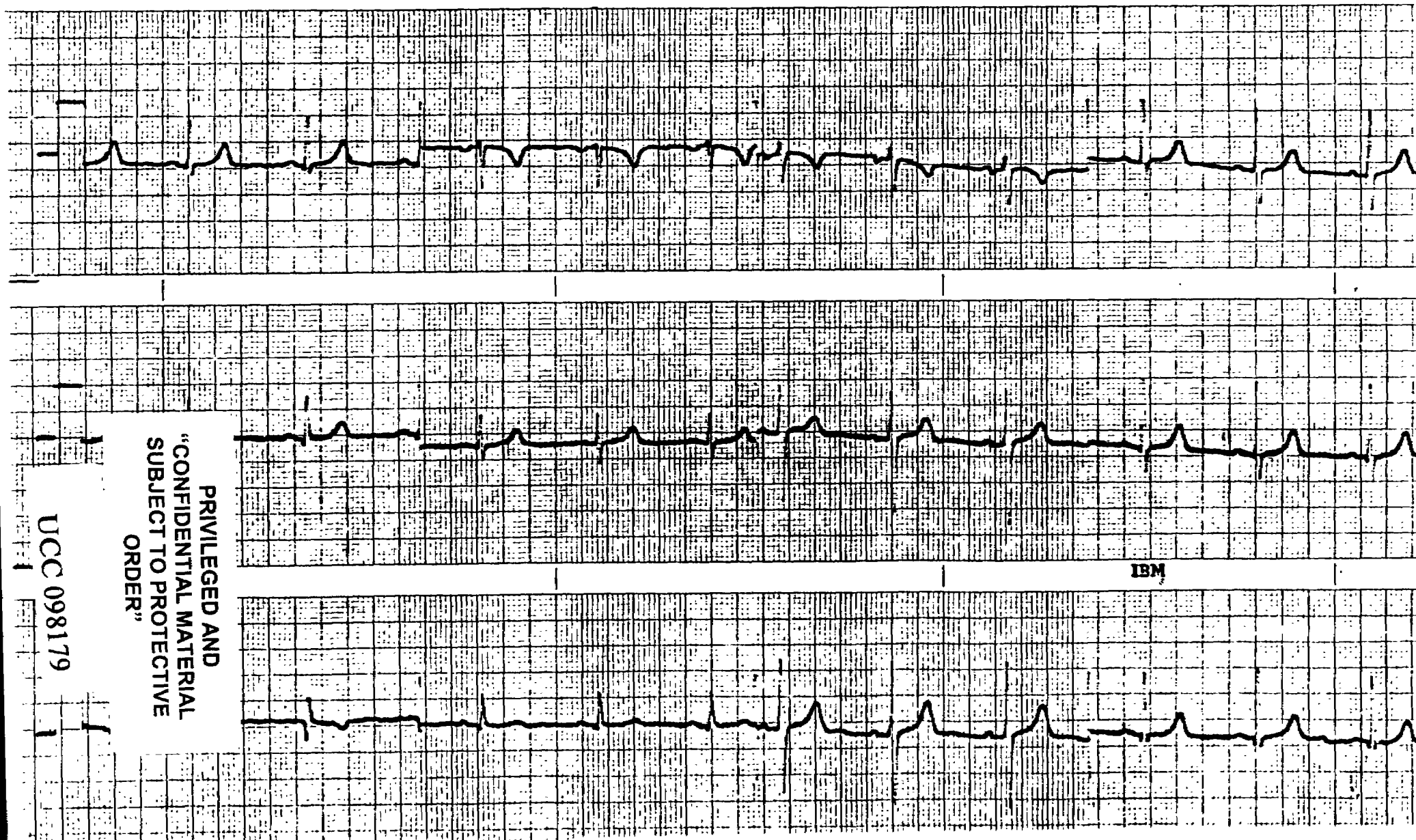
25 MM/S I, II, III

AVR, AVL, AVF

CONFIRMED REPORT-REVIEWED BY
 V1, V2, V3

V4, V5, V6

G. J. Saal, MD.



IBM

PRIVILEGED AND
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 ORDER"

UCC 098179

TH-151
(REV. 2/75)

DISCHARGE SUMMARY

HERBERT J. THOMAS MEMORIAL HOSPITAL
4605 MacCorkle Avenue, S.W.
South Charleston, West Virginia 25309

D: 9/18/81

T: 9/24/81

Patient's Name STEVENS, ERNEST LEE Age 58 Hospital No. 140017
Attending Physician DR. RANSON Date of Admission 8/20/81 Date of Discharge 8/26/81

1. Final Diagnosis

1. Rectal bleeding, rule out hemorrhoids or polyp.
Possible carcinoma of the liver.

2. Chief Complaint and History of Present Illness

2. A few years ago prior to this admission, the patient underwent hemorrhoidectomy. In November of this year he began experiencing bright red blood in his bowel movements. He also complains of pain and itching around the rectal area.

3. Significant Physical Findings

3. Normal vital signs. The liver edge was palpable approximately 14 cms below the right costal margin which was non tender, 3+ pitting edema of the left lower leg, 2+ pitting edema of right lower leg.

4. Significant Laboratory and X-ray Findings

4. Urinalysis normal. Admission CBC showed white count of 9,300, hemoglobin 7.4 gms and hematocrit 22.1%, 68 segs, 0 bands, 28 lymphs and 4 mono. Abnormal findings found on chemistry 22 profile, BUN 21, albumin 3.1, alkaline phosphatase of 72, total bilirubin 1.8, SGOT 124, and the triglycerides 276. Prothrombin time was 12.3 and PTT 22, within normal limits. Rh and HAA both negative. Chest x-ray impression was multiple linear densities in the right lung field, either representing subsegmental atelectasis or fibrosis. Liver scan revealed considerable enlargement of the liver, changes in the right lobe of the liver, most consistent with metastatic disease but a primary tumor could not be excluded. Sonogram of the liver revealed marked enlargement in the area of the right lobe of the liver with primary liver tumor versus metastatic disease being the primary considerations at this time. EKG normal.

5. Medical or Surgical Treatment

5. Medical treatment included multiple transfusions with four units of packed cells.

6. Course in Hospital

6. Uneventful.

7. Physical Condition at Discharge

7. The patient was discharged in stable condition.

8. He is to return to the office in two weeks for follow up care.

8. Instructions for Continued Care

DR:meh

PRIVILEGED AND
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ORDER"

UCC 098180

Signed

G. E. Al-Hajj, M. D.

NAME (LAST)	(FIRST)	(MIDDLE)	DATE	TIME	SEX	RACE	S.S. NUMBER
STEVENS	ERNEST	L.	10-21-81	8:06PM	M	W	234 34 050

GUARANTOR	RELATION	AGE	BIRTH DATE	ARRIVED BY	ACCOMPANIED BY
	SELF	58YRS.	4-28-22	CAR	WIFE

PATIENTS ADDRESS	PREVIOUS ADDRESS	MARITAL STATUS	TELEPHONE
311 32ND. ST. W CHAS W VA 25012	YES	MAR	744 4489

GUARANTOR EMPLOYER	GUARANTOR'S ADDRESS AND TELEPHONE	INSURANCE
DISABLED	SAME	77

EMPLOYER'S ADDRESS AND TELEPHONE	"CONFIDENTIAL MATERIAL SUBJECT TO PROTECTIVE ORDER"	CERTIFICATE NO.	TYPE
NONE		234 34 0503-A	

INSURANCE BILLING ADDRESS	PRIVATE PHYSICIAN OR ER PHYSICIAN ON CALL	FIN	RES	INS	DR	CLERK
	DR. S. SHARP/AL-MAJJI / DR. J. AUDITOR	08	05	80	682	

PATIENTS COMPLAINT AND/OR DATE AND HOUR OF INJURY	PATIENTS COMPLAINT AND/OR DATE AND HOUR OF INJURY
Rectal bleeding since 10/18	

NURSE'S NOTES	HISTORY AND PHYSICAL FINDINGS
TEMP. 98 PULSE 60 BP 152/10 RESP. 24 TIME IN 8:16 PM TIME OUT 10:50 PM KNOWN ALLERGIES: NONE YES (LIST)	He claimed that he has been having a diagnosis by liver scan, ultrasound noted rectal bleeding for a few days. He has a black and blue mark on his abdomen. PE. Alert, in good health. HEENT normal. Chest clear. Lungs clear. Cardiac normal. Abdomen soft. Rectum normal. No hematuria. No stool. Stool soft. Good night sleep.

CURRENT MEDICATIONS: NONE YES (LIST)	DISCHARGED ☐
1. He has severe headache - having for 1 week stool. Stool soft. Night sleep.	WALKING ☒ WC ☐ AMBULANCE ☐

ADMITTED ROOM	NURSE
Admitted	W. J. J. J.

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

DISCHARGED ☐	WALKING ☒ WC ☐ AMBULANCE ☐
ADMITTED ROOM	NURSE

THOMAS
MORIAL HOSPITAL LABORATORY
SOUTH CHARLESTON, W. VA.
B. NEWMAN, M.D. DIRECTOR

Stevens, Ernest L
58/m Dr. Shabb

TYPE OF SPECIMEN		BLOOD	URINE	OTHER	DATE	TIME	BY
REQUEST SLIP MUST BE CLOKED IN WHEN DELIVERED							
GLUCOSE							
ACETONE							
BUN							
CREATININE							
URIC ACID							
CHOLESTEROL							
CALCIUM							
PHOSPHORUS							
TOTAL PROTEIN							
ALBUMIN							
GLOBULIN							
AG RATIO							
BILIRUBIN TOTAL							
DIRECT							
INDIRECT							
ALK. PHOSPH.							
SGOT							
SGPT							
LDH							
AMYLASE							
LIPASE							
ACID PHOS.							
TRIGLYCERIDES							
BLOOD AMMONIA							
IRON							
IRON BINDING							
TOTAL CHOLESTEROL							
TOTAL LIPID							
LDH ISO							
CPK ISO							

UCC 098182

BACTERIOLOGY THOMAS MEMORIAL HOSPITAL LABORATORY
 SOUTH CHARLESTON, WEST VIRGINIA
 BENJAMIN NEWMAN, M.D., DIRECTOR

DATE REQUESTED: 6/10
 COLLECTED BY: [Signature]
 CLINICAL DATA:

110189
 STEVENS, ERNEST L
 N 60 140017
 DR. AL-HAJJ
 WIFE-CAROLYN

ANTIBIOTIC(S):

SPECIMEN SUBMITTED		REQUEST: ☐ STAY ☐ GRAM STAIN
URINE ☐ CLEAN CATCH ☐ CATH. ☒ BLOOD CSF FECES THROAT SPUTUM WOUND SPECIFY:		PRELIMINARY REPORT: S: SENSITIVE I: INTERMEDIATE R: RESISTANT ORGANISM (1) (2) (3) FINAL REPORT: No Growth Aerobic or Anaerobic After 6 Days DATE: 6/10/62 TECH: 81 CULTURE NO.

BACTERIOLOGY THOMAS MEMORIAL HOSPITAL LABORATORY
 SOUTH CHARLESTON, WEST VIRGINIA
 BENJAMIN NEWMAN, M.D., DIRECTOR

DATE REQUESTED: 6/10
 COLLECTED BY: [Signature]
 CLINICAL DATA:

110189
 STEVENS, ERNEST L
 N 60 140017
 DR. AL-HAJJ
 WIFE-CAROLYN

ANTIBIOTIC(S):

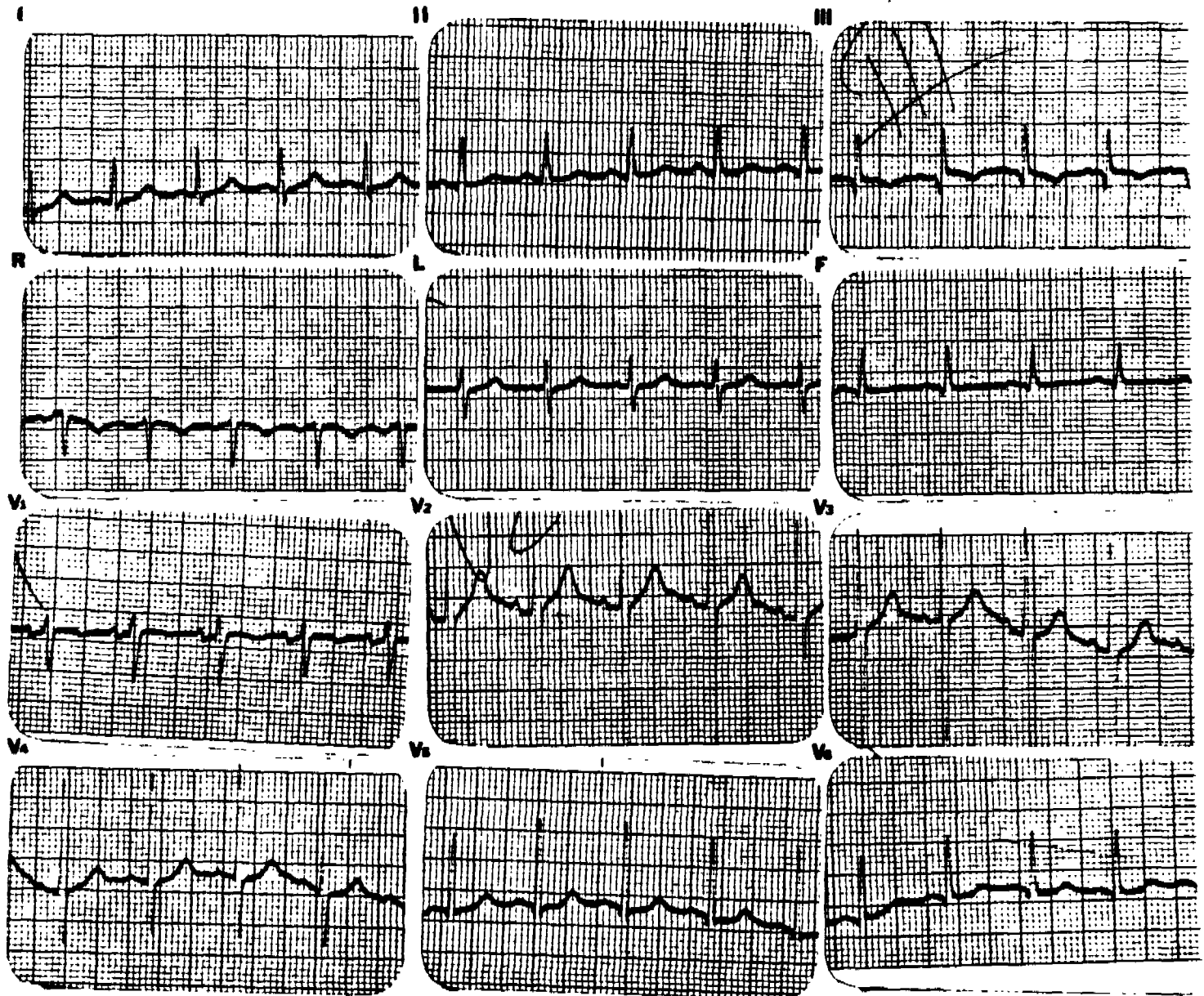
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URINE ☐ CLEAN CATCH ☐ CATH. ☒ BLOOD CSF FECES THROAT SPUTUM WOUND SPECIFY:		PRELIMINARY REPORT: S: SENSITIVE I: INTERMEDIATE R: RESISTANT ORGANISM (1) (2) (3) FINAL REPORT: No Growth Aerobic or Anaerobic After 6 Days DATE: 6/10/62 TECH: 81 CULTURE NO.

PRIVILEGED AND
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 ORDER"

UCC 098183

ER-1116
STEVEN, ERNEST L.

MEDICAL PRODUCTS DIVISION JMC
CATALOG NO. 2410



CLIN. DIAG.:

DATE: 6/6/82

ECG DESCRIPTION:

INTERPRETATION:

Non-specific T wave changes occurred since 8/20/81
in III, and AVF.

DIG. () QUIN. () AGE SEX B.P.

ECG REQUEST BY DR. AL-HAJJ

ATR. RATE 108 VENTR. RATE 108

INTERVALS: P-R 0.15 QRS 0.08 QTc

AXIS:

RHYTHM: Sinus tachycardia.

Counter clockwise rotation.

PATIENT: ER-1116

STEVEN, ERNEST L.

60 M

DR. AL-HAJJ

6/6/82

PRIVILEGED AND
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ORDER"

UCC 098185

INTERPRETED BY

G. S. Seal, M.D.

EMERGENCY DEPARTMENT RECORD

44115 MACCORKLE AVE., S.W., SOUTH CHARLESTON, W. VA. 25303

TH-111 REV. 5-

FOLLOWED BY PHYSICIAN COPY

UNION CARBIDE CORPORATION
437 MAC CORKLE AVE. SOUTH CHARLESTON, W. VA. 25303
LAW DEPARTMENT

JUL 14 1982

JUL 30 1982

July 9, 1982

RECEIVED

AUG 1982

LAW
DEPARTMENT

Medical Records Department
Thomas Memorial Hospital
4605 MacCorkle Avenue, S. W.
South Charleston, West Virginia 25303

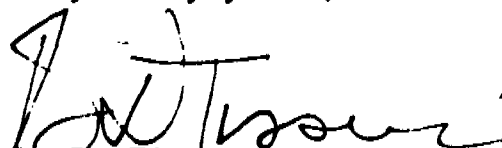
Re: Ernest Lee Stevens
SS No. 234-34-0503
Birth Date: 4-28-22

Gentlemen:

Information at my disposal indicates that Mr. Ernest Lee Stevens of North Charleston, West Virginia, has been a patient at your hospital on several occasions within the past two years. I desire to have a copy of all of his medical records at your institution and for that purpose I enclose herewith a duly executed medical authorization form signed by Mr. Stevens and witnessed by his counsel, Mr. William C. Fields.

Along with the records, please enclose a statement covering the cost of duplicating these records and I shall remit by return mail.

Very truly yours,


B. D. Tissue

BDT/sj

Enclosure

P.S. Enclosed is our check for \$10.00 to cover the charges per our conversation by phone with Ms. Farley on July 30, 1982.

7-30-82
B. D. Tissue

UCC 098188

CHART FRONT

TH-2831 REV 9/81

HERBERT J. THOMAS MEMORIAL HOSPITAL

ACCOUNT NO.	ATTENDING PHYSICIAN	PHYSICIAN NO.	ADMISSION DATE	TIME ADM.	ROOM NO.	BED	TYPE	SERVICE	ADM. BY	MED REC. NO.
E 0110189	AL-HAJJ MD, GABRIEL E	500	6/06/82	1716	1116	02		\$ SURG	ADW	140017
NAME-LAST	FIRST	MIDDLE	BIRTHDATE	AGE	SEX	RACE	MARITAL	SOCIAL SECURITY NO.	RELIGION	STUD.
STEVENS, ERNEST L	NICOM		4/28/22	60Y	M	W	M	000-00-0000	OTH	N
PERMANENT ADDRESS	CITY	STATE	ZIP CODE	PREV. ADM. DATE	PREVIOUS ADMISSION NAME					
311 32ND STREET WEST	CHAS	WV	25312	0/00/00						
LOCAL ADDRESS	CITY	STATE	ZIP CODE	LOCAL PHONE NO.	EMPLOYER PHONE NO.		HOW LONG			
311 32ND STREET WEST	CHAS	WV	25312	304-744-4489						
PATIENTS EMPLOYERS NAME AND ADDRESS	CITY	STATE	ZIP CODE	RESP. PARTY SOC. SEC. NO.	RELATIONSHIP					
RETIRED				000-00-0000						
RESPONSIBLE PARTYS NAME AND ADDRESS	CITY	STATE	ZIP CODE	RESP. PARTY PHONE NO.						
STEVEN, ERNEST L 311 32ND STREET WEST, CHAS, WV 25312				304-744-4489						
RESPONSIBLE PARTYS EMPLOYERS NAME AND ADDRESS	CITY	STATE	ZIP CODE	RESP. PARTY EMPLOYR. PHONE NO.	HOW LONG					
RETIRED					Y					
NOTIFY IN CASE OF EMERGENCY - NAME AND ADDRESS	CITY	STATE	ZIP CODE	EMERGENCY PHONE NO.	RELATIONSHIP					
CAROLYN 311 32ND STREET WEST, CHAS, WV 25312				304-744-4489	WI					
P/C	PRIMARY PAYOR NAME	INSURED'S NAME AND RELATIONSHIP	CERTIFICATE NO.	GROUP NAME AND NO.	B/A					
04	MEDICARE NS/HIC	STEVENS ERNEST SA	234 34 0503 A	GRP	Y					
SECONDARY PAYOR NAME	INSURED'S NAME AND RELATIONSHIP	CERTIFICATE NO.	GROUP NAME AND NO.	B/A						

REMARKS

NON-SMOKER

VISITORS YES

ADMITTING DIAGNOSIS

MEDICAL

MEDICAL RECORDS
CODE

ENTERED

Discharge
Diagnosis

Treatment

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UCC 098189

DISCHARGE DATE	LOS	SERVICE	DISPOSITION	CONSULTANTS
6-19-82	13	Med		615

Signature of Attending Physician

TH-151
(Rev. 2/75)

DISCHARGE SUMMARY

HERBERT J. THOMAS MEMORIAL HOSPITAL
4605 MacC rkl Avenue, S.W.
S uth Charlest n, West Virginia 25309

D: 7/6/82
T: 7/15/82

Patient's Name STEVENS, ERNEST L. Age 60 Hospital No. 140017
Attending Physician DR. AL-HAJI Date of Admission 6/6/82 Date of Discharge 6/19/82

1. Final Diagnosis

1. Liver tumor, probable liver carcinoma versus metastatic disease.

2. Chief Complaint and History of Present Illness

2. This 60 year old white male was admitted to the hospital with hematemesis which had been going on for three days prior to admission. The patient had known carcinoma of the liver, diagnosed approximately nine months ago. A few days prior to admission the patient began vomiting coffee ground like material, also related that he had abdominal pains. He also relates that he has had a very poor appetite for three days prior to admission and intermittent fever of 105 degrees. He denied any cold coryza or urinary complaints.

3. Significant Physical Findings

3. Temperature 104.1, pulse 120, respirations 26, blood pressure 140/76. Abdomen revealed globular distended with engorged veins noted in the hypogastric area and over the left lumbar area. The spleen was palpable approximately 3 finger breadths below the costal margin. The liver was markedly enlarged. The total liver span was 30 cms below the right costal margin. It was smooth and slightly hard on palpation. Rectal examination revealed no masses but stool was positive for occult blood. Extremities revealed varicose veins of both lower extremities.

4. Significant Laboratory and X-ray Findings

4. Urinalysis did have a large amount of occult blood. Feces positive for occult blood. CBC and differential on admission showed 18,500 white count, hemoglobin 5.9 gms and hematocrit 18.9%, MCV 81.6%, MCHC 31.3, differential grossly within normal limits. Abnormal findings on chemistry profile glucose 132, BUN 38, calcium 8, alkaline phosphatase 84, total protein 5.5, albumin 7.8, total bilirubin 1.6, GPT 308, GOT 890, HBD 242, LDH 1,320, cholesterol 281. HAA negative. PT done twice was within normal limits. Blood culture revealed no growth of aerobic or anaerobic after six days. Repeat blood cultures were also negative. Urine culture was negative. Alpha-feto-protein level was 29.6 ng/ml. Anti-hepatitis B E antigen negative. Chest x-ray revealed the heart to be at the upper limits of normal, also slight enlargement in the area of left ventricle. There was an opaque foreign body in the soft tissue in the region of the proximal portion of the right clavicle. Ga-litium scan revealed prominent uptake in the enlarged liver, more prominent in the right lobe corresponding to the tumor mass seen at the liver on the liver scan done in August of 1981. EKG revealed non specific T wave changes which

5. Medication, Surgical Treatment

6. Course in Hospital

7. Physician's Condition at Discharge

8. Instructions for Continuous Care

PRIVILEGED AND
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ORDER"

Signed _____ M.

UCC 098190

TH-151
(Rev. 2/75)

DISCHARGE SUMMARY

HERBERT J. THOMAS MEMORIAL HOSPITAL
4605 MacC rkle Avenue, S.W.
South Charleston, West Virginia 25309

D: _____
T: _____

Patient's Name STEVENS, ERNEST L. Age 60 Hospital No. 140017
Attending Physician DR. AL-HAJJ Date of Admission 6/6/82 Date of Discharge 6/19/82

1. Final Diagnosis

Page 2

2. Chief Complaint
and History of
Present Illness

have occurred since 8/20/81 in III and AVF. Rhythm was sinus tachycardia and counter clockwise rotation.

3. Significant
Physical
Findings

5. Treatment included blood transfusions, anti-emetics, antibiotics, diuretics and analgesics.

4. Significant
Laboratory and
X-ray Findings

6. Consultation was obtained from Dr. Harper, whose impression was liver cancer, secondary to questionable industrial exposure. Fever was thought to represent liver abscess or tumor fever, bleeding from ulcers or tumor. The patient ran a febrile course while in the hospital until the last couple days prior to discharge. On 6/17/82 gallium scan was performed and it was noted the scan and increase in alpha feto protein was consistent with primary hepatoma and that the fever was probably due to the tumor fever.

5. Medical and
Surgical
Treatment

7. Discharged on 6/19/82 in stable condition.

8. To return to the office for follow up care in two weeks.

DR:meh

6. Course in
Hospital

cc: Dr. Harper

7. Physical
Condition
at Discharge

8. Instructions
for Continuation
of Care

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

UCC 098191

Signed _____ M.D.
G. E. Al-Hajj, M. D.

D. 6-6-82
T. 6-7-82

HERBERT J. THOMAS

1116

MEMORIAL HOSPITAL

STEVEN

ERNEST

L.

60

Male

140017

HISTORY SHEET

Dr. G. E. Al-Hajj

Dr. C. N. Bautista

ADMITTING DATE: June 6, 1982.

CHIEF COMPLAINT: Hematemesis.

PRIVILEGED AND
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ORDER"

PRESENT ILLNESS: This is a 60 year old male white married patient who was admitted with complaints of hematemesis which apparently had been going on for the past 3 days prior to his admission. The patient has a known history of cancer of the liver, diagnosed approximately 9 months ago. When he came to the hospital for a hemorrhoid operation, this was found. However, the said operation was deferred since it was found out at that time that the patient had cancer of the liver. The patient has been doing fine, off and on, has been on Percocet every 6 hours since 3 months ago. Apparently, 3 days prior to his admission the patient started vomiting again, material was like coffee-colored vomitus. The condition was accompanied by passing entire colored stool. The patient claims that he was continuously having abdominal pains, although he has been on Percocet, around the clock. Since the morning of his admission, the patient started having chills and fever, temperature, as high as 105 degrees. He has been anorexic for the past 3 days. Denies of any urinary disturbances. No chest pains. No cough. No sore throat. The patient is subsequently admitted for further management.

PAST HISTORY: The patient has no history of high blood pressure. No history of diabetes mellitus. The patient has a history of cancer of the liver, diagnosed approximately 9 months ago. Has a history of hemorrhoids and has had his first hemorrhoid surgery approximate 20 years ago. He has had surgery for a dislocated left shoulder done in the past. Also, has a history of thrombophlebitis of the left leg. The patient claims that his left leg has been bigger compared to the right leg and this has been present since birth.

FAMILY HISTORY: Noncontributory.

PERSONAL AND SOCIAL HISTORY: The patient claims to be allergic to aspirin. He use to smoke a pack of cigarettes daily up and until a year prior to his admission. No history of chronic alcohol intake.

MEDICATIONS: Percocet, 1 every 6 hours. This has been given around the clock since 3 months ago.

REVIEW OF SYSTEMS:

HEENT: No history of headaches or tinnitus.

UCC 098192

CNS: No history of CVA. No history of epilepsy.

CARDIORESPIRATORY: No history of chest pains. No dyspnea. No orthopnea.

GI: Has a history of hematemesis. History of melena. History of cancer of the liver.

GU: No dysuria, hematuria.

NEUROMUSCULAR: There is generalized body weakness.

PHYSICAL FINDINGS: The patient is fairly developed, fairly nourished, appears markedly pale. Does not appear to be in any acute distress.

TEMPERATURE: 104.1.

RESPIRATIONS: 26.

PULSE: 120.

BLOOD PRESSURE: 140/76.

SKIN: The skin color looks jaundiced, pale, no active dermatosis.

HEENT: Normocephalic. No visible external injuries. Markedly pale conjunctiva. Icteric sclera. The pupils are equally reactive to light and accommodation. Throat is congested.

NECK: Negative nuchal rigidity. Neck veins are not engorged. No palpable lymphadenopathy. Negative for any carotid bruits.

CHEST: Symmetrical in expansion. No deformities in the anterior-posterior chest wall. No intercostal retractions. No spider angiomas noted. The lungs are clear. Breath sounds are normal. No rales or wheezes. No intercostal retractions.

HEART: Regular in rhythm. No murmurs appreciated. No gallop rhythm. No friction rub.

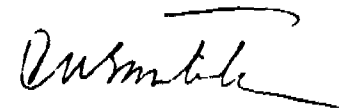
ABDOMEN: Globularly distended with engorged veins noted on the hypogastric area and over the left lumbar area. The spleen is palpable approximately 3 finger breadths below the costal margin. The liver is markedly enlarged. The total liver span is 30 cms. below the right costal margin. It is smooth, slightly hard on palpation. No tenderness noted. Negative for fluid wave. Bowel sounds are normal active.

RECTAL: Stool is positive for occult blood. No masses palpable. No tenderness.

EXTREMITIES: The left lower extremity is larger by at least 2 inches compared to the right leg. Varicosities noted on both lower extremities. The left leg is more severe than the right leg. Dorsalis pedis pulsations are equal on both sides. No cyanosis of the nail beds.

NEUROLOGICAL: The patient is awake, alert, conscious, coherent, cooperative. No gross neurological deficit. No motor or sensory impairment. Deep tendon reflexes are normal active.

IMPRESSION: 1. Upper GI bleeding with secondary anemia.
2. Cancer of the liver.


C. N. Bautista, M.D.

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

G. E. Al-Hajj, M.D.

CNB:bw

UCC 098193

HERBERT J. THOMAS MEMORIAL HOSPITAL
SOUTH CHARLESTON, W. VA.

USE THIS VERT-MOUNT FOR URINALYSIS — FECES REPORTS.

PLACE LEFT SIDE OF REPORT #4 HERE		PLACE LEFT SIDE OF REPORT #3 HERE		44 F12 9 AMT OF 5 CHART COPY Shaver, Ernest L. 60/60 Pr - 11-11-72		6/16/72 URINALYSIS FECES		DONE BY DATE DONE	
				THOMAS MEMORIAL HOSPITAL LABORATORY SOUTH CHARLESTON, WV BENJAMIN NEWMAN, M.D. REQUESTED BY <i>MW</i> 8-6-82 ROUTINE ☒ PRE-OP ☒ STAT ☒ CATHETER ☐ CLEAN ☐ CATCH ☐ VOIDED ☐		ROUTINE ☒ (REV. 5/62) COLOR <i>yellow</i> APPEARANCE <i>clear</i> pH <i>6.0</i> SPECIFIC GRAVITY <i>1.015</i> ALBUMIN (QUAL.) <i>0</i> GLUCOSE (QUAL.) <i>0</i> ACETONE <i>0</i> BILIRUBIN <i>0</i> OCCULT BLOOD <i>large</i> CAST/L.F. RBC/HPF WBC/HPF <i>none</i> RENAL EPI SQUAM EPI BACTERIA <i>abt</i> MUCUS CRYSTALS UROBILINOGEN BENCE-JONES PORPHOBILINOGEN PREGNANCY TEST HCG FECES OCCULT BLOOD BILE UROBILINOGEN FAT STARCH TRYPSIN MUCUS		ROUTINE ☐ (REV. 11-72) COLOR APPEARANCE pH SPECIFIC GRAVITY ALBUMIN (QUAL.) GLUCOSE (QUAL.) ACETONE BILIRUBIN OCCULT BLOOD CAST/L.F. RBC/HPF WBC/HPF RENAL EPI SQUAM EPI BACTERIA MUCUS CRYSTALS UROBILINOGEN BENCE-JONES PORPHOBILINOGEN PREGNANCY TEST HCG FECES OCCULT BLOOD <i>POS</i> BILE UROBILINOGEN FAT STARCH TRYPSIN MUCUS	

CONSOLIDATED BUSINESS FORMS CO

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

ATTACH FIRST REPORT HERE

UCC 098194

USE THIS DATA-MOUNT FOR COULTER MODEL-S
(HEMATOLOGY) REPORTS ONLY.

HERBERT J. THOMAS MEMORIAL HOSPITAL
SOUTH CHARLESTON, W. VA.

USE THIS VERT-MOUNT FOR CHEMISTRY PROFILE REPORTS.

TH-395

THOMAS MEMORIAL HOSPITAL

CHEMISTRY PROFILE

PATIENT Stress, Ernest ^{NA}

PHYSICIAN W. Hays ROOM # 1116

COMMENTS h S-T

SIGNATURE P.M.
SAMPLE 91 Blank Cal.
7 1 6 1 8 2 Cup #
Day Month Year

Outside	Hours	NORMALS
Must Be Covered By Numbers (See Back)		
* 132	mg/dl	GLUC 88-118
* 38	mg/dl	BUN 8-20
* 9.3	mg/dl	URIC MALE 3.5-6.5 FEMALE 1.5-4.5
* 0.9	mg/dl	CREA 0.8-1.6
* 134	mEq/l	Na 135-145
* 4.9	mEq/l	K 3.5-5.0
* 103	mEq/l	Cl 95-105
* 8.0	mg/dl	CALC 8.8-10.0
* 2.7	mg/dl	PHOS 2.4-4.4
* 84	U/L	ALKP 15-44
* 5.5	g/dl	TOTP 5.0-8.0
* 7.8	g/dl	ALB 3.5-4.5
* 2.7	g/dl	GLBN
* 1.1		A/G
* 1.6	mg/dl	TBIL 0.8-1.4
* 308	U/L	GPT 5-41
* 890	U/L	GOT 14-82
* 242	U/L	HBD 31-72
* 1,320	U/L	LDH 99-167
* 85	U/L	CPR MALE 20-100 FEMALE 21-100
* 176	mg/dl	TRIG 25-100
* 281	mg/dl	CHOL 113-250

Must Be Covered By Numbers (See Back)

CREA BLK
TBIL BLK

TH - 351

PLACE RIGHT SIDE OF REPORT #2 HERE

PLACE RIGHT SIDE OF REPORT #3 HERE

PLACE RIGHT SIDE OF REPORT #4 HERE

2

3

4

CONSOLIDATED BUSINESS FORMS CO

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

UCC 098196

CHEMISTRY
PROFILES

HERBERT J. THOMAS MEMORIAL HOSPITAL
SOUTH CHARLESTON, W. VA.

USE THIS VERT-MOUNT FOR CLINICAL CHEMISTRY I.

TH-396

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PLACE LEFT SIDE OF REPORT #2 HERE

4

3

2

CONSOLIDATED BUSINESS FORMS CO.

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

CLINICAL
CHEMISTRY

ACCESSION NO.		DONE BY	DATE DONE																																																																														
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CLINICAL CHEMISTRY I TH-96 REV. 9/79																																																																																	
CHART COPY Pr. 1116 Steven, Ernest L. 60/yr Pr. M. H. H. H.		<table border="1"> <tr><td>GLUCOSE</td><td>131</td><td>mg/dl</td></tr> <tr><td>ACETONE</td><td></td><td></td></tr> <tr><td>BUN</td><td>46</td><td>mg/dl</td></tr> <tr><td>CREATININE</td><td></td><td>mg/dl</td></tr> <tr><td>URIC ACID</td><td></td><td>mg/dl</td></tr> <tr><td>CHOLESTEROL</td><td></td><td>mg/dl</td></tr> <tr><td>CALCIUM</td><td></td><td>mg/dl</td></tr> <tr><td>PHOSPHORUS</td><td></td><td>mg/dl</td></tr> <tr><td>TOTAL PROTEIN</td><td></td><td>gm/dl</td></tr> <tr><td>ALBUMIN</td><td></td><td>gm/dl</td></tr> <tr><td>GLOBULIN</td><td></td><td>gm/dl</td></tr> <tr><td>A/G RATIO</td><td></td><td></td></tr> <tr><td>BILIRUBIN TOTAL</td><td></td><td>mg/dl</td></tr> <tr><td>CLT DIRECT</td><td></td><td></td></tr> <tr><td>INDIRECT</td><td></td><td></td></tr> <tr><td>ALK PHOSPH</td><td></td><td>U/L</td></tr> <tr><td>SGOT</td><td></td><td>U/L</td></tr> <tr><td>LDH</td><td></td><td>U/L</td></tr> <tr><td>CPK</td><td></td><td>U/L</td></tr> <tr><td>HSD</td><td></td><td>U/L</td></tr> <tr><td>AMYLASE</td><td></td><td>U/L</td></tr> <tr><td>LIPASE</td><td></td><td>U/L</td></tr> <tr><td>SGPT</td><td></td><td>U/L</td></tr> <tr><td>TRIGLYCERIDES</td><td></td><td>mg/dl</td></tr> <tr><td>LDH ISO</td><td></td><td>U/L</td></tr> <tr><td>CPK ISO</td><td></td><td>U/L</td></tr> </table>		GLUCOSE	131	mg/dl	ACETONE			BUN	46	mg/dl	CREATININE		mg/dl	URIC ACID		mg/dl	CHOLESTEROL		mg/dl	CALCIUM		mg/dl	PHOSPHORUS		mg/dl	TOTAL PROTEIN		gm/dl	ALBUMIN		gm/dl	GLOBULIN		gm/dl	A/G RATIO			BILIRUBIN TOTAL		mg/dl	CLT DIRECT			INDIRECT			ALK PHOSPH		U/L	SGOT		U/L	LDH		U/L	CPK		U/L	HSD		U/L	AMYLASE		U/L	LIPASE		U/L	SGPT		U/L	TRIGLYCERIDES		mg/dl	LDH ISO		U/L	CPK ISO		U/L
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ROUTINE ☒ STAT ☒ TYPE OF SPECIMEN ☒ BLOOD ☐ URINE ☐ CSF		REQUEST SLIP MUST BE CLOCKED IN WHEN DELIVERED																																																																															

ATTACH FIRST REPORT HERE

UCC 098197

HERBERT J. THOMAS MEMORIAL HOSPITAL
SOUTH CHARLESTON, W. VA.

USE THIS VERT-MOUNT FOR
SEROLOGY AND IMMUNOLOGY

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

TH-402

PLACE LEFT SIDE OF REPORT #4 HERE

4

ACCESSION NO.		DONE BY	DATE DONE	ACCESSION NO.		DONE BY	DATE DONE
110189		JT	6/10/82	110189		JT	6/10/82
STEVENS, ERNEST L.		TH-43 (REV. 12/80)		STEVENS, ERNEST L.		TH-43 (REV. 12/80)	
M 60 140017		IMMUNOLOGY		M 60 140017		IMMUNOLOGY	
DR. AL-NAJJ		IMMUNO-HEMATOLOGY		DR. AL-NAJJ		IMMUNO-HEMATOLOGY	
WIFE-CAROLYN		FLUORESCENCE MICROSCOPY		WIFE-CAROLYN		FLUORESCENCE MICROSCOPY	
CHART COMPLETED		ABO GROUPING		CHART COMPLETED		ABO GROUPING	
110189		Rh TYPING		110189		Rh TYPING	
STEVENS, ERNEST L.		COOMBS (DIRECT)		STEVENS, ERNEST L.		COOMBS (DIRECT)	
M 60 140017		COOMBS (INDIRECT)		M 60 140017		COOMBS (INDIRECT)	
DR. AL-NAJJ		ANTIBODY SCREENING		DR. AL-NAJJ		ANTIBODY SCREENING	
WIFE-CAROLYN		ANTIBODY IDENTIFICATION		WIFE-CAROLYN		ANTIBODY IDENTIFICATION	
CHART COMPLETED		Rh ANTIBODY TITER		CHART COMPLETED		Rh ANTIBODY TITER	
110189		HAA		110189		HAA	
STEVENS, ERNEST L.		IMMUNOLOGY		STEVENS, ERNEST L.		IMMUNOLOGY	
M 60 140017		IgG		M 60 140017		IgG	
DR. AL-NAJJ		IgA		DR. AL-NAJJ		IgA	
WIFE-CAROLYN		IgM		WIFE-CAROLYN		IgM	
CHART COMPLETED		IgD		CHART COMPLETED		IgD	
110189		IgE		110189		IgE	
STEVENS, ERNEST L.		FLUORESCENCE MICROSCOPY		STEVENS, ERNEST L.		FLUORESCENCE MICROSCOPY	
M 60 140017		ANA		M 60 140017		ANA	
DR. AL-NAJJ		HOMOGENOUS		DR. AL-NAJJ		HOMOGENOUS	
WIFE-CAROLYN		SPECKLED		WIFE-CAROLYN		SPECKLED	
CHART COMPLETED		PERIPHERAL		CHART COMPLETED		PERIPHERAL	
110189		FTA		110189		FTA	
STEVENS, ERNEST L.		TOXOPLASMOSIS		STEVENS, ERNEST L.		TOXOPLASMOSIS	
M 60 140017		G.C.		M 60 140017		G.C.	
DR. AL-NAJJ		B. STREP.		DR. AL-NAJJ		B. STREP.	
WIFE-CAROLYN				WIFE-CAROLYN			
CHART COMPLETED				CHART COMPLETED			
110189				110189			
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CHART COMPLETED				CHART COMPLETED			
110189				110189			
STEVENS, ERNEST L.				STEVENS, ERNEST L.			
M 60 140017				M 60 140017			
DR. AL-NAJJ				DR. AL-NAJJ			
WIFE-CAROLYN				WIFE-CAROLYN			
CHART COMPLETED				CHART COMPLETED			

REQUEST SLIP MUST BE CLOKED IN WHEN DELIVERED

THOMAS MEMORIAL HOSPITAL LABORATORY
SOUTH CHARLESTON, W. VA.
B. NEWMAN, M.D., DIRECTOR

REQUESTED BY: [Signature]
DATE TO BE DONE: 6/10/82
X ROUTINE PRE-OP STAY
TIME TO BE DONE

ATTACH FIRST REPORT HERE

UCC 098198

SEROLOGY
IMMUNOLOGY

HERBERT J. THOMAS MEMORIAL HOSPITAL
SOUTH CHARLESTON, W. VA.

USE THIS VERT-MOUNT FOR
COAGULATION STUDIES REPORTS:

TH-400

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PRIVILEGED AND
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4

3

THOMAS MEMORIAL
HOSPITAL LABORATORY
SOUTH CHARLESTON, W. VA.
B. NEWMAN, M.D. DIRECTOR

110189
STEVENS, CAROLYN
M 60 140017
DR. ALMA J.
WIFE-CAROLYN

REQUEST SLIP MUST BE CLOKED IN WHEN DELIVERED

COAGULATION
STUDIES

TH-75 (REV. 8-81)

PROTHROMBIN TIME

CONTROL 11.3 SEC

PATIENT 11.7 SEC

ACTIVATED PARTIAL
THROMBOPLASTIN TIME

CONTROL SEC

PATIENT SEC

FIBRINOGEN
(QUAN.) (200-400)

FDP

CLOT
RETRACTION

BLEED TIME
(1-5 MIN.) MIN.

LEE-WHITE
(5-15) MIN.

PLATELET COUNT
(150000-350000)

SURGICAL SCREENING
INCLUDES APTT-PT
AND PLATELET COUNT

NORMAL

PT 9.5 - 12.5 S

APTT 15 - 30 S

COAGULATION
STUDIES

TH-75 (REV. 8-81)

PROTHROMBIN TIME

CONTROL 11.2 SEC

PATIENT 11.3 SEC

ACTIVATED PARTIAL
THROMBOPLASTIN TIME

CONTROL SEC

PATIENT SEC

FIBRINOGEN
(QUAN.) (200-400)

FDP

CLOT
RETRACTION

BLEED TIME
(1-5 MIN.) MIN.

LEE-WHITE
(5-15) MIN.

PLATELET COUNT
(150000-350000)

SURGICAL SCREENING
INCLUDES APTT-PT
AND PLATELET COUNT

NORMAL

PT 9.5 - 12.5 S

APTT 15 - 30 S

ATTACH FIRST REPORT HERE

UCC 098199

COAG
STUDIES

HERBERT J. THOMAS MEMORIAL HOSPITAL
SOUTH CHARLESTON, W. VA.

TH-401

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4

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3

PRIVILEGED AND
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ORDER"

BACTERIOLOGY		THOMAS MEMORIAL HOSPITAL LABORATORY BENJAMIN NEWMAN, M.D., DIRECTOR SOUTH CHARLESTON, WEST VIRGINIA	
PATIENT NAME		110189 STEVENS, ERNEST L. R 60 140017 DR. AL-HAJJ WIFE-CAROLYN	
DATE RECEIVED IN LAB:		DATE: 6/19/82 TECH: 81	
REQUEST		PRELIMINARY REPORT:	
S: SENSITIVE I: INTERMEDIATE R: RESISTANT		DATE: TECH:	
ORGANISM		CULTURE NO.	
FINAL REPORT:		No Growth Aerobic or Anaerobic After 6 Days	
TEST REQUESTED:		Hepatitis B Surface Antigen + E antigen to SEE REFERENCE LAB. REPORT Bio Med	
COMPLETED BY		DATE DONE	
8C		6/17/82	
MISCELLANEOUS LAB. TH-77		UCC 098200	

USE THIS MOUNT FOR MISCELLANEOUS, BACTERIOLOGY, MYCO BACTERIOLOGY/PARASITOLOGY

CONSOLIDATED BUSINESS FORMS CO.

BACTERIOLOGY
MYCOBAC/
PARAS.

SOUTH CHARLESTON, W. VA.
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"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

CHART COPY

BACTERIOLOGY THOMAS MEMORIAL HOSPITAL LABORATORY
SOUTH CHARLESTON, WEST VIRGINIA BENJAMIN NEWMAN, M.D., DIRECTOR

DATE REQUESTED

6-6-82

COLLECTED BY

CLINICAL DATA

ANTIBIOTIC(S)

170189

STEVENS, ERNEST L

MED 740017

DR. AL-HAJJ

REQUEST: 3

PRELIMINARY REPORT:

S: SENSITIVE
I: INTERMEDIATE
R: RESISTANT

ORGANISM

(1)

(2)

(3)

FINAL REPORT:

No Growth Aerobic or Anaerobic After 6 Days

CULTURE NO.

173

DATE RECEIVED IN LAB:

DATE: 6-14-82 TECH: Jm

DATE: 6-14-82 TECH: Jm

POSITIVE BODY FLUID CULTURES AND BLOOD CULTURES REPORTED TO PHYSICIAN BY
TELEPHONE.

SENSITIVITIES BY DISK DIFFUSION TO FOLLOW IF APPROPRIATE TO ORGANISM CULTURED.

ANAEROBIC CULTURES ROUTINELY DONE ON APPROPRIATE CLINICAL SPECIMENS
(PLEASE SPECIFY IF TRANSTRACHEAL SPUTUM OR ABSCESS SPECIMEN.)

PLEASE CALL MICROBIOLOGY LABORATORY AFTER 10:00 AM IF YOU HAVE
ANY QUESTIONS.

CULTURE NO.

284

PRELIMINARY REPORT:

S: SENSITIVE
I: INTERMEDIATE
R: RESISTANT

ORGANISM

(1)

(2)

(3)

FINAL REPORT:

NO GROWTH 24 HOURS

CULTURE NO.

31

DATE: 6-12-82 TECH: dm

PRELIMINARY REPORT:

No growth After 48 hrs.

DATE: 6-10-82 TECH: dm

POSITIVE BODY FLUID CULTURES AND BLOOD CULTURES REPORTED TO PHYSICIAN BY
TELEPHONE.

SENSITIVITIES BY DISK DIFFUSION TO FOLLOW IF APPROPRIATE TO ORGANISM CULTURED.

ANAEROBIC CULTURES ROUTINELY DONE ON APPROPRIATE CLINICAL SPECIMENS
(PLEASE SPECIFY IF TRANSTRACHEAL SPUTUM OR ABSCESS SPECIMEN.)

PLEASE CALL MICROBIOLOGY LABORATORY AFTER 10:00 AM IF YOU HAVE
ANY QUESTIONS.

CULTURE NO.

173

USE THIS MOUNT FOR MISCELLANEOUS, BACTERIOLOGY, MYCO BACTERIOLOGY/PARASITOLOGY

HERBERT J. THOMAS MEMORIAL HOSPITAL
SOUTH CHARLESTON, W. VA.

PLACE TOP OF REPORT #4 HERE

REPORT

REPORT

DATE

44

4

Series numbers are on

3A

3B

3C

PLACE TOP OF REPORT #3 HERE

3

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

BACTERIOLOGY		THOMAS MEMORIAL HOSPITAL LABORATORY	
SOUTH CHARLESTON, WEST VIRGINIA		BENJAMIN NEWMAN, M.D., DIRECTOR	
REQUESTED: <i>6/15</i>	REQ. BY: <i>Dr. Al-Hajj</i>	DATE: <i>6/15/82</i>	
COLLECTED: <i>6/15</i>	TIME COLLECTED: <i>4:45 PM</i>	PATIENT COPY	
CLINICAL DATA:	<i>110189</i> <i>STEVENS, ERNEST L.</i> <i>M 60 140017</i> <i>DR. AL-HAJJ</i> <i>WIFE-CAROLYN</i>		
NOTICE(S):			
SPECIMEN SUBMITTED	REQUEST: ☐ STAY ☐ GRAM STAIN	DATE: TECH:	
URINE ☐ CLEAN CATCH ☐ MATH.	PRELIMINARY REPORT:		
BLOOD	S: SENSITIVE I: INTERMEDIATE R: RESISTANT		
THROAT	ORGANISM		
SPUTUM	(1)		
WOUND	(2)		
	(3)		
DATE RECEIVED IN LAB:	FINAL REPORT: No Growth Aerobic or Anaerobic After <i>6</i> Days	CULTURE NO.	
	DATE: <i>6/18/82</i> TECH: <i>BJ</i>		
SPECIMEN SUBMITTED	REQUEST: ☐ STAY ☐ GRAM STAIN ☐ CULTURE	DATE: TECH:	
URINE ☐ CLEAN CATCH ☐ MATH.	PRELIMINARY REPORT: No growth After 48 hrs.		
BLOOD		DATE: <i>6/15/82</i> TECH: <i>BJ</i>	
CSF	POSITIVE BODY FLUID CULTURES AND BLOOD CULTURES REPORTED TO PHYSICIAN BY TELEPHONE. SENSITIVITIES BY DISK DIFFUSION TO FOLLOW IF APPROPRIATE TO ORGANISM CULTURED. ANAEROBIC CULTURES ROUTINELY DONE ON APPROPRIATE CLINICAL SPECIMENS (PLEASE SPECIFY IF TRANSTRACHEAL SPUTUM OR ABSCESS SPECIMEN.) PLEASE CALL MICROBIOLOGY LABORATORY AFTER 10:00 AM IF YOU HAVE ANY QUESTIONS.		
THROAT		CULTURE NO. <i>319</i>	
SPUTUM			
WOUND			
SPECIES			
DATE RECEIVED IN LAB:			

USE THIS MOUNT FOR MISCELLANEOUS, BACTERIOLOGY, MYCO BACTERIOLOGY/PARASITOLOGY

HERBERT J. THOMAS MEMORIAL HOSPITAL

TH-398

NO.	ACCOUNT NO.	SPECIMEN NO.
	47300595	73-45-0647
OF SPECIMEN	DATE PROCESSED	SEX AGE
JUN 82	16 JUN 82	M 60
FIRST PATIENT NAME MIDDLE		
VENS ERNEST		
PATIENT ADDRESS		



Biomedical Reference Laboratories, Inc.

Designations of our Regional Laboratory Directors, addresses and the reverse of this form.

BURLINGTON, NC INSIDE NC 800-875-3848
BIRMINGHAM, AL OUTSIDE NC 800-894-6181
CHARLOTTE, NC 305-945-8881
COLUMBIA, SC 704-575-8871
FAIRBURY, WV 800-894-6181
HOUSTON, TX 281-545-1235
MEMPHIS, TN (SOUTH) 901-545-1235
PENSACOLA, FL 904-494-0045

PHYSICIAN OR LABORATORY

H J THOMAS MEMORIAL HOSPITAL
SOUTH CHARLESTON WV 25309

006

ADDITIONAL INFORMATION

140017 AL HAJJ

Rm 1116
6/17/82

TEST	RESULT	LIMITS
ALPHA-1-FETOPROTEIN (SERUM RIA)	29.6 NG/ML	
MATERIAL SERUM, 95% OF NORMAL AFP VALUES SHOULD BE LESS THAN		
AFP RESULTS MUST BE CONFIRMED BY AMNIOTIC FLUID AFP (TEST 2428)		
GESTATION SER AFP	GESTATION SER AFP	GESTATION SER AFP
12 WKS 130 NG/ML	24 WKS 400 NG/ML	36 WKS 400 NG/ML
ANTI-HEPATITIS B E ANTIGEN	NEGATIVE	NEGATIVE

HERBERT J. THOMAS MEMORIAL HOSPITAL LABORATORY
SOUTH CHARLESTON, WEST VIRGINIA
BENJAMIN NEWMAN, M.D., DIRECTOR

TEST REQUESTED BY: *msc*
DATE TO BE DONE: *6/17/82*
ACCESSION NO: *101782*

REQUEST SLIP MUST BE CLOKED IN WHEN DELIVERED

SEE REFERENCE LAB. REPORT

COMPLETED BY: *see*

DATE DONE: *6/17/82*

MISCELLANEOUS LAB. TH-77

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

1

USE THIS HORIZONTAL MOUNT FOR SPECIAL CHEMISTRY

THOMAS MEMORIAL HOSPITAL LABORATORY SOUTH CHARLESTON, W. VA. B. NEWMAN, M.D. DIRECTOR			44 ER		110189 Steven, Ernest L. 140017 60/m Mr. A1-Hy;		BLOOD BANK TRANSFUSION (INSTR. 11-10)									
ROUTINE ☒ PREOP ☒ STAT ☒ DATE NEEDED <u>6-1-82</u>																
SUBMIT ONE FORM FOR EACH UNIT			IN		OUT											
☒ WHOLE BLOOD	☒ LEUKOCYTE POOR BLOOD	PREVIOUS TRANS. ☐ YES ☐ NO	DATE													
☒ RED BLOOD CELLS	☒ RHOGAM	PREVIOUS REACTION ☐ YES ☐ NO														
☒ FRESH FROZEN PLASMA	☒ OTHER	☐ PLATELET														
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH														
GROUP <u>A</u> Rh <u>pos</u> ANTIBODY SCREEN <u>Large</u>		SALINE ROOM TEMP. ☒ ALBUMIN @ 37° C ☒ COOMBS ☒														
ANTIBODY I.D.		CROSSMATCH BY <u>Strout</u> 6/1/82		RELEASED BY <u>Strout</u> 6/1/82												
DONOR NO. <u>7771</u>		TH 83		IN		OUT										
BLOOD BANK TRANSFUSION			TH 83		IN		OUT									
☒ WHOLE BLOOD	☒ LEUKOCYTE POOR BLOOD	PREVIOUS TRANS. ☐ YES ☐ NO	DATE													
☒ RED BLOOD CELLS	☒ RHOGAM	PREVIOUS REACTION ☐ YES ☐ NO														
☒ FRESH FROZEN PLASMA	☒ OTHER	☐ PLATELET														
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH														
GROUP <u>A</u> Rh <u>pos</u> ANTIBODY SCREEN <u>Large</u>		SALINE ROOM TEMP. ☒ ALBUMIN @ 37° C ☒ COOMBS ☒														
ANTIBODY I.D.		CROSSMATCH BY <u>Strout</u> 6/1/82		RELEASED BY <u>Strout</u> 10/30												
DONOR NO. <u>7769</u>		TH 83		IN		OUT										
BLOOD BANK TRANSFUSION			TH 83		IN		OUT									
☒ WHOLE BLOOD	☒ LEUKOCYTE POOR BLOOD	PREVIOUS TRANS. ☐ YES ☐ NO	DATE													
☒ RED BLOOD CELLS	☒ RHOGAM	PREVIOUS REACTION ☐ YES ☐ NO														
☒ FRESH FROZEN PLASMA	☒ OTHER	☐ PLATELET														
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH														
GROUP <u>A</u> Rh <u>pos</u> ANTIBODY SCREEN <u>Large</u>		SALINE ROOM TEMP. ☒ ALBUMIN @ 37° C ☒ COOMBS ☒														
ANTIBODY I.D.		CROSSMATCH BY <u>Strout</u> 6/1/82		RELEASED BY <u>Strout</u> 9/5												
DONOR NO. <u>7896</u>		TH 83		IN		OUT										
BLOOD BANK TRANSFUSION			TH 83		IN		OUT									
☒ WHOLE BLOOD	☒ LEUKOCYTE POOR BLOOD	PREVIOUS TRANS. ☐ YES ☐ NO	DATE													
☒ RED BLOOD CELLS	☒ RHOGAM	PREVIOUS REACTION ☐ YES ☐ NO														
☒ FRESH FROZEN PLASMA	☒ OTHER	☐ PLATELET														
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH														
GROUP <u>A</u> Rh <u>pos</u> ANTIBODY SCREEN <u>Large</u>		SALINE ROOM TEMP. ☒ ALBUMIN @ 37° C ☒ COOMBS ☒														
ANTIBODY I.D.		CROSSMATCH BY <u>Strout</u> 6/1/82		RELEASED BY <u>Strout</u> 7/8												
DONOR NO. <u>7894</u>		TH 83		IN		OUT										
BLOOD BANK TRANSFUSION			TH 83		IN		OUT									

USE THIS MOUNT FOR BLOOD BANK TRANSFUSION

HERBERT J. THOMAS MEMORIAL HOSPITAL
SOUTH CHARLESTON, W. VA.

PRIVILEGED AND
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ORDER"

TH-403

THOMAS MEMORIAL HOSPITAL LABORATORY SOUTH CHARLESTON, W. VA. B. NEWMAN, M.D. DIRECTOR			DATE JUN 10 1962		TIME 11:00 AM	
ROUTINE PRE-OP STA			SUBMIT ONE FORM FOR EACH UNIT		IN OUT	
☒ WHOLE BLOOD	☐ LEUKOCYTE POOR BLOOD	☐ PREVIOUS TRANS.	DATE			
☒ RED BLOOD CELLS	☐ RHOGAM	☐ PREVIOUS REACTION	DATE			
☐ FRESH FROZEN PLASMA	☐ OTHER	☐ PLATELET	DATE			
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH	DATE			
GROUP A Rh pos		SALINE ROOM TEMP.		✓		
ANTIBODY SCREEN Larg		ALBUMIN @ 37°C		✓		
ANTIBODY I.D.		COOMBS		✓		
DONOR NO. 7912		CROSSMATCH BY		6/10/62		
		RELEASED BY		6/10/62		
BLOOD BANK TRANSFUSION TH 83			IN OUT			
☒ WHOLE BLOOD	☐ LEUKOCYTE POOR BLOOD	☐ PREVIOUS TRANS.	DATE			
☒ RED BLOOD CELLS	☐ RHOGAM	☐ PREVIOUS REACTION	DATE			
☐ FRESH FROZEN PLASMA	☐ OTHER	☐ PLATELET	DATE			
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH	DATE			
GROUP A Rh pos		SALINE ROOM TEMP.		✓		
ANTIBODY SCREEN Larg		ALBUMIN @ 37°C		✓		
ANTIBODY I.D.		COOMBS		✓		
DONOR NO. 7952		CROSSMATCH BY		6/10/62		
		RELEASED BY		6/10/62		
BLOOD BANK TRANSFUSION TH 83			IN OUT			
☒ WHOLE BLOOD	☐ LEUKOCYTE POOR BLOOD	☐ PREVIOUS TRANS.	DATE			
☒ RED BLOOD CELLS	☐ RHOGAM	☐ PREVIOUS REACTION	DATE			
☐ FRESH FROZEN PLASMA	☐ OTHER	☐ PLATELET	DATE			
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH	DATE			
GROUP A Rh pos		SALINE ROOM TEMP.		✓		
ANTIBODY SCREEN Larg		ALBUMIN @ 37°C		✓		
ANTIBODY I.D.		COOMBS		✓		
DONOR NO. 7772		CROSSMATCH BY		6/10/62		
		RELEASED BY		6/10/62		
BLOOD BANK TRANSFUSION TH 83			IN OUT			
SUBMIT ONE FORM FOR EACH UNIT			IN OUT			
☐ WHOLE BLOOD	☐ LEUKOCYTE POOR BLOOD	☐ PREVIOUS TRANS.	DATE			
☒ RED BLOOD CELLS	☐ RHOGAM	☐ PREVIOUS REACTION	DATE			
☐ FRESH FROZEN PLASMA	☐ OTHER	☐ PLATELET	DATE			
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH	DATE			
GROUP A Rh pos		SALINE ROOM TEMP.		✓		
ANTIBODY SCREEN Larg		ALBUMIN @ 37°C		✓		
ANTIBODY I.D.		COOMBS		✓		
DONOR NO. 7951		CROSSMATCH BY		6/10/62		
		RELEASED BY		6/10/62		
BLOOD BANK TRANSFUSION TH 83			IN OUT			

USE THIS MOUNT FOR BLOOD BANK TRANSFUSION

CONSOLIDATED BUSINESS FORMS CO

UCC 098205

BLOOD BANK

HERBERT J. THOMAS MEMORIAL HOSPITAL
SOUTH CHARLESTON, W. VA.

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ORDER"

TH-403

THOMAS MEMORIAL HOSPITAL LABORATORY SOUTH CHARLESTON, W. VA. B. NEWMAN, M.D. DIRECTOR			DATE - 6/14/82		ROUTINE PRE-OP STAT	
SUBMIT ONE FORM FOR EACH UNIT			IN	OUT	DATE	
☐ WHOLE BLOOD	☐ LEUKOCYTE POOR BLOOD	☐ PREVIOUS TRANS. YES ☐ NO				
☐ RED BLOOD CELLS	☐ RHOGAM	☐ PREVIOUS REACTION YES ☐ NO				
☐ FRESH FROZEN PLASMA	☐ OTHER	☐ PLATELET				
☐ RECIPIENT	☐ DONOR	☐ CROSSMATCH				
GROUP <u>A</u> Rh <u>POS</u>		SALINE ROOM TEMP. <u>✓</u>				
ANTIBODY SCREEN <u>NEG</u>		ALBUMIN @ 37° C <u>✓</u>				
ANTIBODY I.D.		COOMBS <u>✓</u>				
DONOR NO. <u>77935</u>		CROSSMATCH BY <u>1/1/82</u>				
BLOOD BANK TRANSFUSION TH-83			IN	OUT	DATE	
☐ WHOLE BLOOD	☐ LEUKOCYTE POOR BLOOD	☐ PREVIOUS TRANS. YES ☐ NO				
☐ RED BLOOD CELLS	☐ RHOGAM	☐ PREVIOUS REACTION YES ☐ NO				
☐ FRESH FROZEN PLASMA	☒ <u>Red cells</u>	☐ PLATELET				
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH				
GROUP <u>A</u> Rh <u>POS</u>		SALINE ROOM TEMP. <u>✓</u>				
ANTIBODY SCREEN <u>NEG</u>		ALBUMIN @ 37° C <u>✓</u>				
ANTIBODY I.D.		COOMBS <u>✓</u>				
DONOR NO. <u>7855</u>		CROSSMATCH BY <u>6/10/82</u>				
BLOOD BANK TRANSFUSION TH-83			IN	OUT	DATE	
☐ WHOLE BLOOD	☐ LEUKOCYTE POOR BLOOD	☐ PREVIOUS TRANS. YES ☐ NO				
☐ RED BLOOD CELLS	☐ RHOGAM	☐ PREVIOUS REACTION YES ☐ NO				
☐ FRESH FROZEN PLASMA	☒ <u>Red cells</u>	☐ PLATELET				
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH				
GROUP <u>A</u> Rh <u>POS</u>		SALINE ROOM TEMP. <u>✓</u>				
ANTIBODY SCREEN <u>NEG</u>		ALBUMIN @ 37° C <u>✓</u>				
ANTIBODY I.D.		COOMBS <u>✓</u>				
DONOR NO. <u>7856</u>		CROSSMATCH BY <u>6/10/82</u>				
BLOOD BANK TRANSFUSION TH-83			IN	OUT	DATE	
☐ WHOLE BLOOD	☐ LEUKOCYTE POOR BLOOD	☐ PREVIOUS TRANS. YES ☐ NO				
☐ RED BLOOD CELLS	☐ RHOGAM	☐ PREVIOUS REACTION YES ☐ NO				
☐ FRESH FROZEN PLASMA	☒ <u>Red cells</u>	☐ PLATELET				
☒ RECIPIENT	☒ DONOR	☒ CROSSMATCH				
GROUP <u>A</u> Rh <u>POS</u>		SALINE ROOM TEMP. <u>✓</u>				
ANTIBODY SCREEN <u>NEG</u>		ALBUMIN @ 37° C <u>✓</u>				
ANTIBODY I.D.		COOMBS <u>✓</u>				
DONOR NO. <u>7854</u>		CROSSMATCH BY <u>6/10/82</u>				

USE THIS MOUNT FOR BLOOD BANK TRANSFUSION

CONSOLIDATED BUSINESS FORMS CO.

UCC 098206

BLOOD BANK

PLACE TOP OF REPORT #4 HERE

4

**PRIVILEGED AND
"CONFIDENTIAL MATERIAL
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ORDER"**

PLACE TOP OF REPORT #3 HERE

3

PLACE TOP OF REPORT #2 HERE

2

THOMAS MEMORIAL HOSPITAL LABORATORY SOUTH CHARLESTON, W. VA. B. NEWMAN, M.D. DIRECTOR				CHART NO. 74142	
REG BY <i>Qw</i>		DATE NEEDED <i>6/15/72</i>			
☐ ROUTINE	☐ PRE-OP	☐ STAT			
SUBMIT ONE FORM FOR EACH UNIT				IN	OUT
☐ WHOLE BLOOD	☐ LEUKOCYTE POOR BLOOD	PREVIOUS TRANS. DATE ☐ YES ☐ NO		WHOLE BLOOD PLASMA CELLS	
☒ RED BLOOD CELLS	☐ RHOGAM	PREVIOUS REACTION ☐ YES ☐ NO		CROSSMATCH/TRANSFUSION REPORT	
☐ FRESH FROZEN PLASMA	☐ OTHER	☐ PLATELET		REACTION	
☐ RECIPIENT ☐ DONOR GROUP <i>A</i> Rh <i>POS</i> ANTIBODY SCREEN <i>NEG</i>		☐ CROSSMATCH		DATE <i>6/15/72</i> TIME <i>12:25</i> AMOUNT <i>100</i>	
☐ ANTIBODY I.D.		SALINE ROOM TEMP. <i>2</i> ALBUMIN @ 37° C <i>2</i> COOMBS <i>2</i>		REACTION <i>YES</i>	
DONOR NO. <i>71909</i>		CROSSMATCH BY <i>15</i> RELEASED BY <i>6/15/72</i>		YES ☐ NO ☐	
BLOOD BANK TRANSFUSION TH-83					

USE THIS MOUNT FOR BLOOD BANK TRANSFUSION

00034
6/9

6-9-82

PF/clS

**PRIVILEGED AND
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ORDER"**

Paul Franke, Jr.

504

NAQIHA: RECIPIENT

PATIENT ARRIVED:

EXPERIMENTAL

1037 JUL 10 1948

THX-80-XRAY REPORT AND REQUEST
REVISED 2-78

UCC 098208

Examined by underlined: J. Dennis Kugel, M.D.
W.A. Deardorff, M.D.
Paul Francke, M.D.
Thomas M. Hayes, Jr.
Martin Worshe, M.D.

CHART OR DOCTOR'S COPY

NUCLEAR MEDICINE DEPARTMENT
THOMAS MEMORIAL HOSPITAL
NUCLEAR MEDICINE CONSULTATION

ADDRESS—O—GRAPH PLATE POSITION

0189
STEVENS, ERNEST L
N 48 140017
DR. AL-HAJJ
WIFE-CAROLYN

NB

1116

CODE NUMBER

AGE SEX HEIGHT WEIGHT

DEPT. 16	CODE	CHECK THE DESIRED STUDY:	DEPT. 16
7895		THYROID SCAN	7825
7800		THYROID UPTAKE	7881
		NORMAL VALUES	7891
		1 HR. UPTAKE	7871
		2 HR. UPTAKE	7853
		6 HR. UPTAKE	7860
		24 HR. UPTAKE	7888
7814		T-3	7873
7810		ETR	7910
7834		SCHILLINGS TEST	7900
7816		DIGOXIN	7716
7817		DIGITOXIN	7716
7955		TSH	7880
7815		T4	7861
			7920

311 32nd St. West Chgo. Ill
Gallium Scan 25312

REQUEST REC'D 6-12-80
SAMPLE COLL. 6/17/82
TEST COMPLETED 6/17/82
TECHNOLOGIST PHB/D/V/M
7880 7820
LIVER SCAN COLLOIDAL ROSE BENGAL
BRAIN SCAN
CISTERNOGRAPHY
CARDIAC SCAN 7716 7706
ISOTOPE THERAPY 131I 32P
SPLEEN 3mCi Ga. 67 CITRATE (IV)
TRIOLEIN FAT ABSORPTION 3mCi
MECKELS DIVERTICULUM 3mCi

IS THE PATIENT TAKING THE FOLLOWING MEDICATIONS? (PATIENTS HAVING T3, T4, ETR THYROID SCAN OR THYROID UPTAKE)

THYROID YES NO DILANTIN YES NO
BIRTH CONTROL PILLS YES NO ANTICOAGULANTS YES NO
OTHER HORMONES ANTITHYROID DRUGS YES NO

HAS THE PATIENT HAD ANY OF THE FOLLOWING IN THE PAST THREE WEEKS?

LUGOLA SOLUTION, IODIDES (SOME VITAMINS), IODINE OINTMENTS, IODINE TINCTURE. YES NO

HAS THE PATIENT HAD GALL BLADDER OR KIDNEY X-RAYS IN THE PAST THREE MONTHS?

HAS THE PATIENT HAD A MYELOGRAM OR BRONCHOGRAM IN THE PAST YEAR?

MEDICATIONS TAKEN AT HOME

BRIEF CLINICAL HISTORY OR WORKING DIAGNOSIS Vomiting blood
Known by GA-liver abdominal pain chills + fever 105°
PHYSICAL FINDINGS Anorexia x3 days
6/17/82

#15760

GALLIUM SCAN: With projections made at 24 hours, 48, hours and 72 hours, reveals prominent uptake in the enlarged liver, which is more prominent at th right lobe corresponding to the tumor mass seen at the liver on the liver scan of August 1981. There is no other foci of uptake evident.

JDK/pda

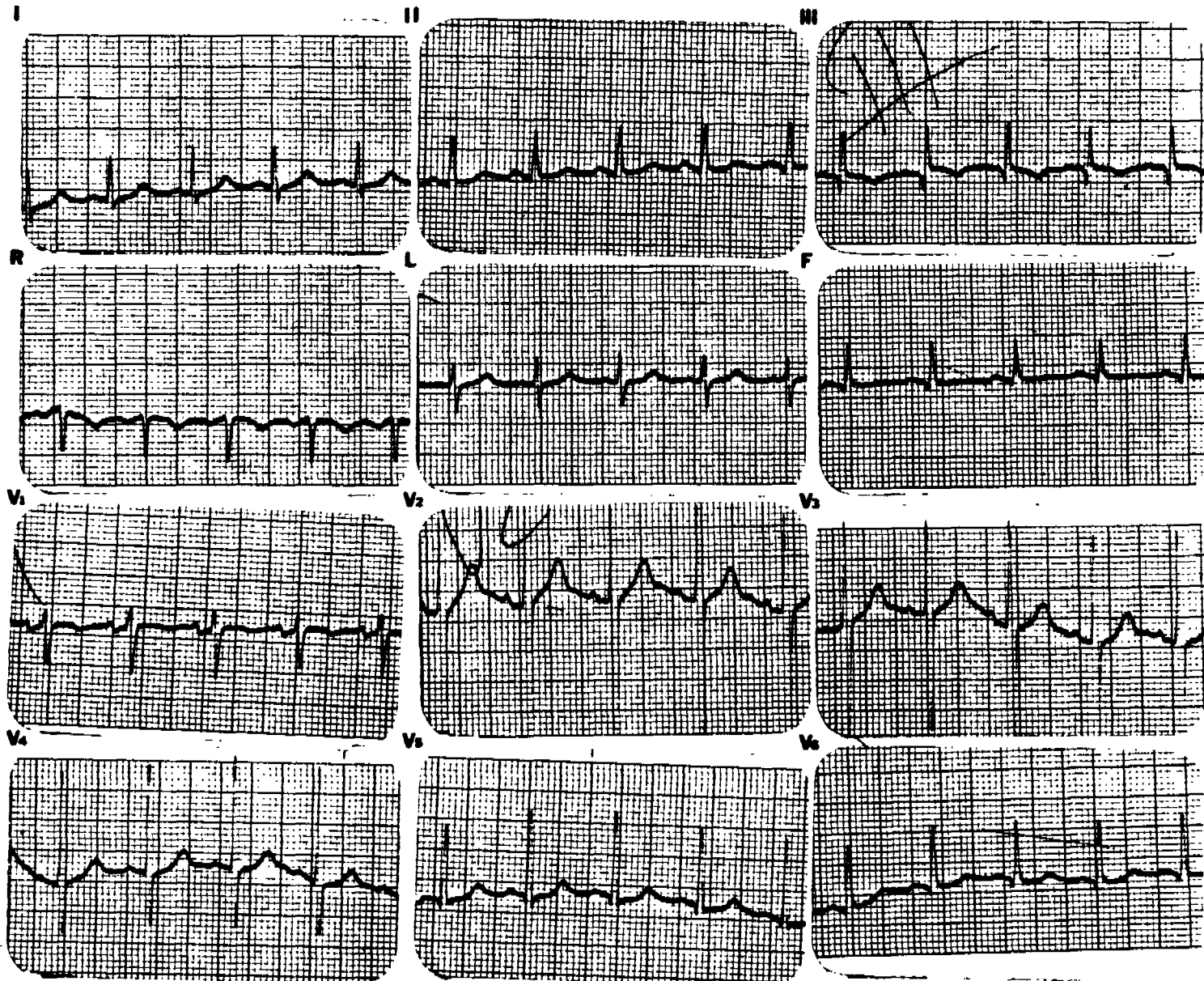
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ORDER"

UCC 098209

[Signature]

ER-1116
STEVEN, ERNEST L.

MEDICAL PRODUCTS DIVISION JMC CO.
CATALOG NO. 2410



CLIN. DIAG.:

DATE: 6/6/82
ECG DESCRIPTION:

INTERPRETATION:

Non-specific T wave changes occurred since 8/20/81
in III, and AVF.

DIG. () QUIN. () AGE SEX B.P.

ECG REQUEST BY DR. AL-HAJJ

ATR. RATE 108 VENTR. RATE 108

INTERVALS: P-R 0.15 QRS 0.08 Qk

AXIS:

RHYTHM: Sinus tachycardia.

Counter clockwise rotation.

PATIENT: ER-1116
STEVEN, ERNEST L.
60 M
DR. AL-HAJJ
6/6/82

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ORDER"

UCC 098210

G. Z. Saal, MD.

INTERPRETED BY

GZG: /jm

(Rev. 2-75)

HERBERT J. THOMAS MEMORIAL HOSPITAL
4605 MacCorkle Avenue, S.W.
South Charleston, West Virginia 25309

D: 9/18/81

T: 9/24/81

Patient's Name STEVENS, ERNEST LEE Age 58 Hospital No. 140017
Attending Physician DR. RANSON Date of Admission 8/20/81 Date of Discharge 8/26/81

1. Final Diagnosis 1. Rectal bleeding, rule out hemorrhoids or polyp.
Possible carcinoma of the liver.
2. Chief Complaint and History of Present Illness 2. A few years ago prior to this admission, the patient underwent hemorrhoidectomy. In November of this year he began experiencing bright red blood in his bowel movements. He also complains of pain and itching around the rectal area.
3. Significant Physical Findings 3. Normal vital signs. The liver edge was palpable approximately 14 cms below the right costal margin which was non tender, 3+ pitting edema of the left lower leg, 2+ pitting edema of right lower leg.
4. Significant Laboratory and X-ray Findings 4. Urinalysis normal. Admission CBC showed white count of 9,300, hemoglobin 7.4 gms and hematocrit 22.1%, 68 segs, 0 bands, 28 lymphs and 4 mono. Abnormal findings found on chemistry 22 profile, BUN 21, albumin 3.1, alkaline phosphatase of 72, total bilirubin 1.8, SGOT 124, and the triglycerides 276. Prothrombin time was 12.3 and PTT 22, within normal limits. Rh and HAA both negative. Chest x-ray impression was multiple linear densities in the right lung field, either representing subsegmental atelectasis or fibrosis. Liver scan revealed considerable enlargement of the liver, changes in the right lobe of the liver, most consistent with metastatic disease but a primary tumor could not be excluded. Sonogram of the liver revealed marked enlargement in the area of the right lobe of the liver with primary liver tumor versus metastatic disease being the primary considerations at this time. EKG normal.
5. Medical or Surgical Treatment 5. Medical treatment included multiple transfusions with four units of packed cells.
6. Course in Hospital 6. Uneventful.
7. Physical Condition at Discharge 7. The patient was discharged in stable condition.
8. 8. He is to return to the office in two weeks for follow up care.

DR:meh

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UCC 098211

Signed

G. E. Al-Hajj, M. D.

M.D

INTERNAL CORRESPONDENCE

RECEIVED

JUN 22 1982

G. J. TRIPLETT

THANE INTERMEDIATES

P. O. BOX 8361, SOUTH CHARLESTON, WEST VIRGINIA 25303

To (Name) Mr. R. N. Bates*
 Division R. W. Holland, M.D.*
 Location Mr. R. G. Link
 Mr. H. L. Wise
 Mr. J. L. Worstall*

Date June 22, 1982
 Originating Dept. Environmental Affairs
 Subject North Charleston Steering
 Committee Meeting Minutes -
 June 18, 1982

Copies: Mr. W. E. Ballard
 Mr. R. O. Cavender*
 Mr. T. D. Epps*
 Mr. T. E. Lawrence
 Mr. L. E. McClure
 Mr. R. R. Rankin
 Mr. J. R. Soice
 Mr. B. D. Tissue*

RECEIVED

JUN 23 1982

LAW
 DEPARTMENT

RECEIVED

JUN 25 1982

*Attended Meeting

- A. R. N. Bates briefly reviewed with Messrs. Bob Cavender and Mike Lipscomb their assignment in which they are to investigate all complaints from the community surrounding the Bulk Terminal and communicate the findings and information to appropriate UCC management. They are to attempt to develop a communication relationship with the residents in the North Charleston area and thereby assist in the overall effort to indicate to the community that UCC is concerned about odor problems in the North Charleston area that develop from the Bulk Terminal. Messrs. Cavender and Lipscomb are to develop an internal communication system to insure that they are promptly notified when complaints are received from North Charleston residents.
- B. A decision has been made to gradually remove acrylates from the North Charleston Bulk Terminal.
- C. T. D. Epps indicated he had attended in order to obtain information for developing a report on the status of the North Charleston situation which could be given to EPA representatives when they visit the Institute Plant on July 9.
- D. R. L. Foster reported that the Plant Manager at the Yabucoa Puerto Rico Carbon Products Plant has developed an extensive and detailed public relations program which he is using to communicate with the residents in the community surrounding the Carbon Products Plant. RLF will contact the manager and ask him to attend a meeting of this committee to describe this program in detail and results that have been obtained to date.
- E. B. D. Tissue summarized the recent actions that had been taken resulting from the hospitalization of Mr. Ernest Stevens who had previously given a deposition on his health condition to his legal council. BDT has reported

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 ORDER"

UCC 098212

North Charleston Steering
Committee Meeting Minutes -
June 18, 1982

-2-

June 22, 1982

*No - This was
negotiated - but
not in hand
Bob*

that he has obtained permission to obtain medical history and information on Mr. Stevens' condition.

- F. J. L. Worstell indicated he would summarize a list of tanks and the toxic/hazardous chemicals that are stored in the Bulk Terminal area and describe the emission control devices on those tanks.

B. L. Foster
R. L. Foster

RLF:ke
Ext. 3406

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UCC 098213

UNION CARBIDE CORPORATION
437 MAC CORKLE AVE. SOUTH CHARLESTON, W. VA. 25303
LAW DEPARTMENT

RECEIVED

6-21-82

JUN 21 1982

R. A. BUTLER June 21, 1982

R. A. Butler, Esq.
Law Department - E3262
DANBURY



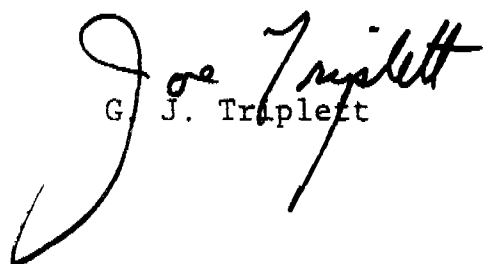
Re: Ernest L. Stevens
Air Pollution - North Charleston, West Virginia

Dear Bob:

As I advised you by telephone, we have agreed to waive any defects in the service associated with the taking of the deposition of Ernest L. Stevens in exchange for Mr. Stevens' authorization to examine his medical records.

The foregoing is confirmed by Mr. W. T. Shaffer's letter to me of June 18, 1982, with its enclosures, copies attached. — *attached*

Very truly yours,


G. J. Triplett

GJT/pe

Attachments

c: J. E. Geoghan, Esq. (w/att.)
C. C. Smith, Jr., Esq. (w/att.)

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

UCC 098214

JACKSON, KELLY, HOLT & O'FARRELL

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June 18, 1982

RECEIVED

JUN 21 1982

G. J. TRIPLETT

Joseph Triplett, Esquire
Union Carbide Corporation
437 MacCorkle Avenue
South Charleston, West Virginia 25303

Dear Joe:

Enclosed is the medical authorization signed by Ernest L. Stevens as well as a copy of the stipulation waiving any defects in procedure or service associated with the taking of the Stevens' deposition.

My kindest regards.

Very truly yours,

W. T. Shaffer
W. T. Shaffer

WTS/ad
Enclosures

PRIVILEGED AND
"CONFIDENTIAL MATERIAL
SUBJECT TO PROTECTIVE
ORDER"

UCC 098215

A U T H O R I Z A T I O N

TO WHOM IT MAY CONCERN:

I, the undersigned, Ernest L. Stearns
do hereby authorize any physician, hospital, institution, employer,
other person, firm or corporation, or the West Virginia Workmen's
Compensation Commissioner to release (upon presentment of this
authorization or any photostatic copy of the same) to any repre-
sentative of Union Carbide Corporation, or to any designee thereof,
or to bearer, any information, records, x-rays, papers, notes and
histories, or any other papers concerning any treatment, examinations,
periods or stays of hospitalization, confinement, diagnosis, or
other information pertaining to and concerning my physical or
mental condition, or my employment, and any and all other papers
concerning any claim or claims filed by me against any employer
or employers before the West Virginia State Workmen's Compensation
Commissioner. This authorization also includes authority to copy
any and all papers, records, etc. This authorization is continuing
in nature and is to be given full force and effect to discover
information of any of the foregoing learned or determined after
the date hereof.

19 42 Dated at Charleston this 17th day of June.

WITNESS:

Ernest L. Stearns

UCC 098216

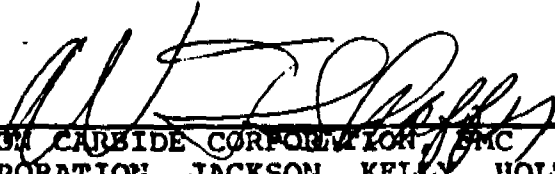
IN THE CIRCUIT COURT OF KANAWHA COUNTY, WEST VIRGINIA

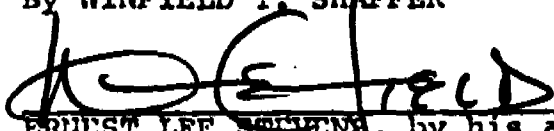
IN RE: Ernest Lee Stevens

CIVIL ACTION NO. 82-135

AGREEMENT AND STIPULATION

It is hereby agreed by Union Carbide Corporation, FMC Corporation, Jackson, Kelly, Holt & O'Farrell and Winfield T. Shaffer, their attorneys, that each of those named individuals and corporations waive any defects in procedure or service associated with the taking of the deposition of Ernest Lee Stevens in the above-styled civil action. This waiver is executed with the understanding that Ernest Lee Stevens will provide Union Carbide Corporation and FMC Corporation or their attorneys with a properly executed medical authorization.


UNION CARBIDE CORPORATION, FMC
CORPORATION, JACKSON, KELLY, HOLT
& O'FARRELL, and WINFIELD T. SHAFFER
By WINFIELD T. SHAFFER


ERNEST LEE STEVENS, by his attorney,
WILLIAM C. FIELD

UCC 098217

Health stepped in and asked that Hooker be required to hire a private consultant to conduct a health survey, if that becomes necessary. DEC and Hooker have been meeting for weeks to work out details of an agreement to address a dioxin contamination problem voluntarily reported by Hooker.

Court Imposed Consent Order May Be Alternative

According to Barbara Guibord, assistant counsel for the DEC's Hazardous Disposal Site Compliance Team, the breakdown of the talks may lead to a formal hearing, conducted by the DEC commissioner, and a court-imposed consent order.

Negotiations began April 6 when Hooker notified DEC that dioxin concentrations ranging up to 500 ppm had been discovered in containers of tar residues at the company's North Tonawanda plant. Dioxin was also found in two of four groundwater samples taken from wells near the containers.

The Hooker-DEC negotiated consent order would have required Hooker to conduct extensive sampling to determine the extent, if any, of off-site dioxin contamination. According to Guibord, Hooker had no problem with this provision.

Although Hooker rejected the Health Department's request and ended the talks, the company has agreed to complete the technical aspects of the order, including installation of new, off-site wells and additional testing.

Without the consent order, added Guibord, DEC has limited access to the site and little leverage to make Hooker comply.

Dioxin Found During Special Testing

Although Hooker routinely monitors their wells, the test for dioxin was specifically conducted to determine the extent of dioxin contamination at the site, which was surveyed as part of a 1979 Interagency Task Force Report on Hazardous Wastes.

According to the report, 14 sites on the property were used between 1930 and 1973 for the disposal of approximately 28,500 tons of individual wastes, including drummed quantities of chlorinated phenols, of which dioxin is a by-product.

STATE DEADLINES

MAY 21—EPA granted Phase II Interim Authorization (Components A & B) to Georgia for its hazardous waste management program (47 Federal Register 22096).

ENFORCEMENT & LITIGATION

WOBURN, MASS. SUIT BASED ON ENVIRONMENTAL TORT ISSUE

A unique environmental tort case was filed May 12 in Massachusetts by 23 Woburn residents based on allegations that contaminated drinking water caused damages including death and serious illness in their families.

The suit, unusual because it raises liability questions in this newly developing area of law notable for its lack of precedent, was filed by the public interest law firm, Trial Lawyers for Public Justice. Anthony Roisman, formerly special counsel for hazardous waste litigation at the Department of Justice, is executive director of the law firm.

The 23 Woburn plaintiffs contend that they and their decedents have "either contracted fatal illnesses, been exposed to a significant risk of contracting fatal or otherwise serious illness and/or suffered significant mental anguish as a result of the contamination of their drinking water."

Damages and Injunction Asked

The suit asks for punitive and compensatory damages and an injunction against defendants, Cryovac, Inc., W. R. Grace Company, John J. Riley Co., Beatrice Foods, and XYZ Co., whose identity is unknown. Under the provisions of Massachusetts law, the amount of damages is not stated in the complaint. The presiding judge or, in the case of a jury trial, the jury decides if entitlement exists and what the award should be. Whether an injunction and its provisions are imposed will also be determined by the judge or jury.

Health Survey Cited

According to the complaint, residents of the area who had complained about the water quality for years and who had noted the rising rate of illness in their area, became alarmed when groundwater wells were found to have hazardous contaminate levels and were shut down.

A study conducted by the Massachusetts Health Department and the Center for Disease Control found that, for the decade 1969-1978: (1) the overall death rate to Woburn was 8 percent higher than expected based on statewide experience; (2) deaths from cancer were 13 percent higher than the state cancer mortality rate; and (3) that significantly more deaths than expected were reported for cancers of the kidney and female organs other than the cervix. The findings also showed that

more than twice the number of expected childhood leukemias were identified.

The complaint also alleges that during the operation of the drinking wells, the defendants "disposed of or allowed to be disposed, chemical waste products, organic solvents and other wastes on their properties."

One important issue in this case is whether strict liability will be imposed on the defendants. The case questions whether during the course of their operations, they were aware of "reasonably foreseeable consequences": that the waste from their operations might escape and contaminate the groundwater. The strict liability provision has been used by attorneys in arguing cases involving ultra-hazardous substances.

DEFENDANTS SENTENCED IN PENNSYLVANIA'S PITTSTON CASE

In one of Pennsylvania's self described "most infamous and complex" stream pollution cases, Elmo Scatena was sentenced last week to 11-22 months in prison, fined \$195,000, and placed on five years probation. His two sons were fined \$130,000 each and given five-year probationary sentences for their role in joining their father in allowing toxic chemicals to be dumped into a borehole on their property.

Pennsylvania Attorney General LeRoy Zimmerman said "the sentencing of the Scatenas nearly completes the lengthy investigation of the dumping of millions of gallons of toxic chemicals that found their way from the borehole into the Susquehanna River," (see *HWR*, Vol. 3, no. 16, p. 15).

The illegal dumping was arranged by the president and five employees of the now defunct Hudson Oil Refining Corp. of Edgewater, New Jersey. Russell Mahler of Westport, Connecticut, president of the corporation, has begun serving a one-year jail term in federal prison following sentencing in April. He was also ordered to pay fines, restitution, and prosecution costs totalling \$760,000. Zimmerman said the one-year jail term and \$760,000 in fines given to Mahler were "the largest penalties imposed in a criminal case involving environmental violations in Pennsylvania history." It also marks the first imprisonment of a business executive who was involved in white-collar crime by way of his perpetrating violations of Pennsylvania's rigid clean streams regulations," the Attorney General said.

Mahler paid the Scatenas between \$150 and \$200 for each truck-tank load of wastes they allowed to be dumped into the borehole located on their property. The Scatenas were convicted in September 1980, on a variety of charges of clean streams violations, risking a catastrophe, and illegal discharges into a mine and a

river, but their sentencing was delayed by post-trial appeals. Two Hudson Oil dispatchers are still awaiting sentence.

EPA ISSUES GUIDELINES TO COORDINATE ENFORCEMENT AND RESPONSE ACTIONS

EPA published in the Federal Register May 13 guidelines for federal, state, local, and private parties providing them with a general description of how response actions taken under Superfund will be coordinated with the use of enforcement authorities available to the Agency and the Department of Justice (DOJ).

The guidelines point to existing authority not only under Superfund, but under RCRA, TSCA, the Clean Water Act, the Clean Air Act, the Safe Drinking Water Act, and in common law. Also included are administrative orders, enforcing standards and permits, information gathering, and other imminent hazard and emergency powers.

Flexibility a Must

In order to be most effective, an enforcement program must be adaptable to a wide range of situations, EPA's guidelines state. Consequently, choice of enforcement authority or use of administrative orders will be handled case by case.

Responsible Parties Given Chance to Voluntarily Clean Up

Before response activity or enforcement action begins, EPA will try to provide oral or written notice to potentially responsible parties. This notice is intended to give the identified parties a chance to voluntarily clean up and to advise them of their potential liability if the site has to be cleaned up by the government. If voluntary cleanup is unobtainable, EPA and DOJ officials will determine whether to use Superfund or other administrative tools.

If a site is cleaned up with Superfund money, the guidelines say "every effort will be made" to recover costs incurred.

The guidelines encourage states to take the lead in bringing enforcement actions. Coordination of federal/state actions will be accomplished primarily through the use of cooperative agreements.