STANDARD OIL COMPANY
(INDIANA)

910 SOUTH MICHIGAN AVENUE

CHICAGO 80, ILLINOIS

MEDICAL DEPARTMENT
BRYCE B. REEVE, M. D.
MEDICAL DIRECTOR
NELSON W. BOLYARD, M. D.
ASSISTANT MEDICAL DIRECTOR
GEORGE M. GOLDEN, M. D.
PAUL D. HALLEY
INDUSTRIAL HYGIENIST

July 17, 1956

Robert A. Kehoe, M. D.
University of Cincinnati
The Kettering Laboratory
College of Medicine - Eden Avenue
Cincinnati 19, Ohio

Dear Dr. Kehoe:

Mr. Halley has referred your letter of June 18 relative to lead analyses for me to reply.

As you probably know, we have been handling lead compounds other than tetraethyl lead for quite a number of years. We have had no reason to suspect that our employees are contracting lead poisoning as a result of such handling. On the other hand, we believe it might be advisable to run a few checks to see if there is any evidence that the amount of lead in the blood and urine of selected employees or groups of employees is significantly out of line. We do not at this time contemplate any wholesale examination of employees handling these inorganic lead compounds but are thinking more of a pilot type study handled through this office.

Since you indicate in your letter that you would need to deal directly with the physicans in each refinery and that the way would have to be paved for you at each location, we are wondering if this shuts the door to the type of work we have in mind at this time. For your information, we do not have full time physicians in our smaller refineries. Also, with regard to the cost of analyses, we would like some clarification as to whether this includes the consultation and interpretation which you have indicated to be a necessary part of your services.

We will appreciate hearing from you at your convenience.

Yours truly,

B B Reeve M. D.

Medical Director

N 6271

BBR:feh

June 18, 1956

Mr. Paul D. Halley
Industrial Hygienist
Standard Oil Company (Indiana)
910 South Michigan Avenue
Chicago 80, Illinois

Dear Mr. Halley:

Mr. Cholak has turned over your letter of June 11 to me for reply, since we do not render analytical services, as such, in situations of this type, but rather a medical service. May I suggest to you, and indirectly to your medical associates, that these samples and the results obtained from them should be handled by the physicians as part of confidential medical records. Otherwise, in cases that require medical handling, the situation comes to be unduly complicated. This is not, strictly speaking, a matter of environmental hygiene, but of clinical medicine. It should be kept so from the start, not because of medical protocol, but because of the medico-legal complications that develop otherwise. This is no criticism of yourself or of your inquiry, but rather it is a fact which we have learned, as usual, by the hard way.

We require information, in accordance with a sheet which accompanies each set of containers, concerning the job, the nature of the exposure to lead, and particularly, about the clinical status of the individual. This is necessary for the interpretation of the results. For example, the results have quite a different meaning in relation to exposure to tetraethyl lead, as compared with exposure to inorganic lead. Moreover, if the patient is ill, and especially if he had had any therapy, the results require careful interpretation. Therefore, these go through my hands for interpretation and for medical advice when it is required.

We will provide the containers, and Mr. Cholak's group will carry out the analyses and report them to me, provided we obtain the information which we need to interpret the results and give advice concerning them. The most useful procedure is that of obtaining duplicate blood samples, and a single spot sample of urine in each instance. Twenty-four hour samples of urine are usually unnecessary, and their collection is fraught with the danger of contamination. Much more information is obtained from the type of samples indicated above. We can establish the status of the individual satisfactorily,

and, of course, the combined results on a group of men in the same occupation are even more valuable. Instructions will be supplied each time, but if there is any question at all about the procedure, we should be consulted about the specific problem. It is difficult sometimes to obtain entirely satisfactory samples, but if I know the problem, I can advise accordingly.

The cost is $10.00 for the duplicate blood samples (as though they were one sample) and $10.00 for the urine. This cost includes all costs but those of special reporting by telephone or telegraph.

Your greatest problem will be that of providing me with the proper information. If the physicians will work with me in a completely cooperative manner, we can give you good service. If they do not, your company will be wasting its money and we, our time. The way will have to be paved for this at each refinery. I leave this in your hands and will await further word from you as to how this is to be handled.

Cordially yours,

Robert A. Kehoe, M. D.

RAK ef

Dictated but not read.

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PAUL D. HALLEY
INDUSTRIAL HYGIENIST

June 11, 1956

Mr. Jacob Cholak
Kettering Laboratory
University of Cincinnati
College of Medicine
Cincinnati 19, Ohio

Dear Jack:

We have been considering the possibility of lead analyses in blood and urine and need some information.

We do not contemplate routine analyses at this time. Instead, we may have some cases where we would want from one to several employees checked occasionally, particularly in case we have reason to suspect our control procedures are becoming lax. This would mean that we would want on hand, lead-free containers for blood and urine. We could probably give advance notice where we wish such samples analyzed.

We would like to know whether Kettering Laboratory would provide such prepared containers to be kept at our individual refineries and what the approximate cost would be for providing this service and analyzing the specimens. I anticipate a need for about six to twelve such sets of containers at each of our six refineries. We probably should be equipped to obtain both spot urine specimens and 24-hour specimens.

We will appreciate a reply at your convenience.

Sincerely,

Paul

Paul D. Halley
Industrial Hygienist

PDH:fek