

Eagle-Picher Lead Co., Cincinnati, O.

July 6, 1933

Lead poisoning.

\$15.71

T.T. July 28, 1933 to Nov. 2, 1933 - - - - - \$146.58

QUESTION:

Further compensation.

- - - - -

A review of this file shows that the claimant was employed by the above concern as a laborer in July of 1933, when he contracted lead poisoning, which necessitated total disability over the period set forth in the caption.

As to his condition subsequent to that date, special examination conducted by Dr. Hudson, on May 3rd, 1934, show that the claimant, now thirtyeight years of age still complains of not feeling well, of having been sick ever since the original disability, of having spells of pain in stomach and bowels and of being very weak. Examination disclosed that the claimant was well nourished and developed, neurological examination essentially negative - there was no definite wrist or foot drop or evidence of residual paralysis. Complained of tenderness to palpation over the abdomen. Commenting on the case, Dr. Hudson states that the majority of the symptoms have subsided at the present time with the exception of tenderness over the abdomen and subjective symptoms of lead colic; that this could be due to other causes, but from the history, claimant apparently suffered from lead poisoning

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NOV 10 1934
No. O.D.10562.

- 2 -

and possibly same was connected with his original disability. However, in his opinion the claimant is ready for light work and disability at the present time does not exceed a moderate partial degree.

CONCLUSION:

It is concluded that the proof herein is sufficient to show that the major portion of claimant's symptoms at this time are subjective in nature; that he may have a partial disability of moderate degree which will continue for some time to come; that the claimant, according to his own statements is still unemployed and unable to be employed.

RECOMMENDATION:

That temporary partial compensation on an impairment of \$3.00 be awarded from date of last payment to August 1st, 1934; that claimant be advised that compensation beyond that date will depend upon him securing suitable employment and filing wage statements showing a definite impairment in his earnings by reason of the original disability.

S. M. GREGORY
E. NYSEVANDER
J. M. GALL

A. O. E. 10562

932 COURT ST.,
Cincinnati, Ohio.

Eagle-Picher Lead Co.

May 3, 1934.

May 3, 1934.

Age - 38

Date of injury - 7-6-33

Nature of injury - "lead colic."

COMPLAINT

States he does not feel very good. Has been sick ever since he had lead colic. Says he had a spell last Friday night, pain in the stomach and bowels. Is very weak. Not working.

EXAMINATION

Well nourished and developed colored man. Neurological examination essentially negative. There is no definite wrist or foot drop or evidence of residual paralysis, on this examination. Complaints of tenderness to palpation over the abdomen.

COMMENT

The examiner is unable to state if this claimant suffered from lead poisoning as the majority of the symptoms have subsided at the present time with the exception of tenderness over the abdomen and subjective symptoms of lead colic. However this could be due to other causes. From history of the case however claimant apparently suffered from lead poisoning. However claimant is ready for light work as disability at the present time does not exceed a moderate partial degree.

RECOMMEND

Temporary partial of moderate degree for four months, with re-examination.

OS. M. GREGORY
CHAIRMAN
L. E. NYSEWANDER
J. W. BEALL
A. D. CADDELL
SECRETARY



H. H. DORR, M. D.
CHIEF MEDICAL EXAMINER

WORKMEN'S COMPENSATION
THE INDUSTRIAL COMMISSION OF OHIO
MEDICAL SECTION
COLUMBUS

May 27, 1935.

Dr. Robert Kehoe,
College of Medicine,
University of Cincinnati,
Cincinnati, O.

Claim No. OD 10562

NAME

ADDRESS 952 Court St.,

Cincinnati, O.

Dear Doctor:-

We are referring the above claimant to you for examination,
report and opinion as to whether or not claimant is suffering
from lead poisoning, and if so, if it is of such severity as to
cause an impairment of his earning capacity.
You may notify the claimant at the address given above when to
appear at your office for this purpose.

We are enclosing, herewith copy of Statement of Facts
copy of med. examination.

which will give you a history of the case, as shown by our files.
Kindly send your report in TRIPLICATE, together with your fee bill,
direct to the Medical Section, as soon as possible. The extra
form enclosed is for your files.

In preparing your report, please use the following subheadings
in the order given:-

- (1.) HISTORY—of injury and treatment, past medical history, previous injuries, family history (if applicable).
- (2.) PATIENTS COMPLAINTS—describe in detail even if they have no apparent connection with the injury.
- (3.) EXAMINATION—include all objective findings, clinical, laboratory and X-ray.
- (4.) DISCUSSION—summary and treatment indicated.
- (5.) OPINION—extent of disability (total or partial). If total how soon will he be able to work. If partial, estimate degree on percentage basis if possible.

Use the Form (C-111) enclosed and continue your report on the reverse if necessary.

Very truly y

H. H. DORR, M. D.,
Chief Medical Examiner.

DR. W. E. ELDER/ eh

IN REPLYING, ALWAYS GIVE CLAIM NUMBER.
NOTIFY THE CHIEF IF YOUR INQUIRIES ARE NOT ANSWERED WITHIN TEN DAYS.

O.D. 10562

Eagle Picher LeadCo.

July 1933

5-31-1935

Complete clinical examination

\$ 40 00

(Consisting of physical examination, microscopic blood examination (Red count, white count, differential count, haemoglobin determination, count of stippled erythrocytes), urinalysis, lead analysis on Blood, lead analysis on Urine, Wasserman and Kahn Tests)

Check on lead analysis on urine

No Charge

\$40 00

Free Bill - Blank attached

O.D. 10562

Eagle Picher Lead Co (note misspelling on report)
(also fill in age on back)

July 1933

Aug 31/1933 Physical Examination 10.00

Laboratory examination

Red Cell Count

5.00

White Cell Count

5.00

Hemoglobin determination

5.00

Differential white cell count

Urinalysis

Lead analysis on Blood

5.00

Lead analysis on urine

5.00

Check on lead analysis on urine (no charge)

Serological Examination

Wassermann test

Kahn test

(ask Dr. Schudis about
charge)

Miss S. D. has these items used listed and
charges made in favor come before entering the
charges RAK (see over)

Dr. H. H. Dorr
Chief Medical Examiner
Industrial Commission of
Columbus, Ohio

and having a regular and exact knowledge

of the nature of the

investments in the various industries

2.

3

4

5

He has and ought to have a knowledge of the
my opinion is not likely to be original and

6. - Yes. He can do substantially better work

7

8

9

Comparison with the best might be
attempted and a subsequent examination made.
of the present position of the industry in

unpublished

11/8

Dear Dr. Dorr:

Robert A. Kehoe, M.D.

UF 0016502



— Jim Cunningham

The Eagle-Picher Lead Company

PRODUCERS OF
LEAD, ZINC AND ALLIED PRODUCTS

GENERAL OFFICES
CINCINNATI

TEMPLE BAR BUILDING
CINCINNATI
April 11, 1939.

Kettering Laboratory of Applied Physiology,
Eden and Bethesda Ave.,
Cincinnati, Ohio.

Gentlemen: Attention Dr. Kehoe.

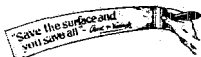
This letter will serve to introduce the bearer,
Mr. [REDACTED], one of our employees. Dr. Anthony
Matuska phoned you yesterday regarding this man's visit
to you.

Yours truly,

THE EAGLE PICHER LEAD COMPANY

Wesley Engel.

WE/B



SALES OFFICES AND WAREHOUSE STOCKS IN ALL PRINCIPAL CITIES

KE 0016503

May 4, 1939

Dr. Anthony Matuska
1320 Broadway
Cincinnati, Ohio

Dear Doctor Matuska:-

I am sending you herewith
my complete report on the case of [REDACTED]
The first set of analyses are included in the original
report, while the results of the two analyses of large
samples are attached.

I received a blank form for
my fee bill in this case and have sent it in to the
Industrial Commission.

(25.00)
rec'd

If you have occasion to see
this man, I would appreciate your suggesting to him
that I would be glad to see him again from time to
time so as to observe his progress in recovery.

Very truly yours,

RAK:is

Robert A. Kehoe, M.D.