

Conf list

Name

Plant: Millington, N. J.

No. 27628

Reading Date 4/22/72

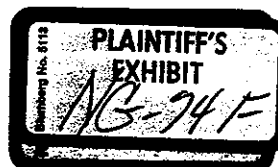
Interpretation of Single

roentgenogram of chest

taken on 2/14/72

There has been an increase in the small rounded and irregular densities and the calcified pleuro plaque is again seen. The film is consistent with mixed asbestosis and silicosis. See previous report.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland, Ohio 44104



EK 12115

H
Name

C
Plant: Millington, N.J.

No.

27628

Reading Date 11-13-70

Interpretation of

single

roentgenogram of chest

taken on

10-26-70

The film of this date again shows the calcified pleura plaque on the left. A review of his films from 1955 to date shows the development of barely discernible but definite increase of the bronchovascular markings with beading or branching densities in the upper half of both lungs. The films overall strongly suggest a mild lung reaction to a mixed exposure of asbestos and free crystalline silica. Does he have a history of such exposure? Thoracic scoliosis is again noted.

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland, Ohio 44104

KK 11/13/70

② Name

Plant: Millington, New Jersey

No. 27623

Reading Date 7-5-68

Interpretation of single

roentgenogram of chest

taken on 6-27-68

In addition to the prominent bronchovascular markings thickened pleura and scoliosis previously described there are also irregular linear densities at the level of the mid-left lung which represent calcific pleura plaque formation. If he has a history of exposure to asbestos fiber, the plaques are likely associated/

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland, Ohio 44104

RvH

KK 2810

Name

Plant: Millington, N.J.

No. 27628

Reading Date 2-3-67

Interpretation of single

roentgenogram of chest

taken on 12-28-66

The bronchovascular markings are rather prominent especially on the left and the lungs appear unusually voluminous. The horizontal fissure is visible and there is moderate thoracic scoliosis. A comparison of this film with others going back to 1955 shows only a slight increase of the scoliosis and that the fissure became visible after 1962. The films suggest that he may have diffuse airway obstruction such as seen in anatomical emphysema and that in the last year or two he likely had pneumonia at sometime which caused pleurisy--now healed.

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland, Ohio 44104

KK 40011

Name . Plant: Millington, N.J. ✓
No. 27628 Reading Date 6/8/64
Interpretation of single roentgenogram of chest
taken on 5/13/64

N The description of the film taken in 1960 is
the same as the present one. See previous
reports. There has not been a change.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 12212

Name	Plant:	Millington, N. J.
No. 30-62	Reading Date:	6/27/62
Interpretation of single	roentgenogram of chest	
taken on 6/21/62		

No change when compared to previous reports.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Snaker Boulevard
Cleveland 4, Ohio

KK "2013

NGC

Name _____ Plant: Millington, New Jersey
No. 52-60 Reading Date: 4/20/60
Interpretation of single roentgenogram of chest
taken on 4/1/60 compared with _____ taken on _____

A review of the films of '53, '55, and '57 together with the current one indicates that the vascular markings are somewhat prominent throughout both lungs. I don't consider this a new development. I doubt if this has any significance but would like a complete occupational history to evaluate this series of films.

Scoliosis of thoracic spine is again noted.

Send →

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 1000

Name: Plant: Millington, N. J. (NGC)
No. 43-57-B Reading Date: 1-13-58
Interpretation of Single roentgenogram of chest
taken on 12-30-57 compared with taken on

No change as compared to previous reports.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 12005

GEORGE W. WRIGHT, M. D.

DEPARTMENT OF
EXPERIMENTAL MEDICINE

January 16, 1956

ST. LUKE'S HOSPITAL
11311 SHAKER BLVD.
CLEVELAND 4, OHIO

No. 55-32-B
Name

National Gypsum Co. Interpretation of single roentgenogram
Millington, N. J. of chest taken on 12-5-55
compared with taken on 9-16-53

No change.

KK 12576

GEORGE W. WRIGHT, M.D.

a

DEPARTMENT OF
EXPERIMENTAL MEDICINE

SAINT LUKE'S HOSPITAL
11311 SHAKER BLVD.
CLEVELAND 4, OHIO

No. 8~

Name _____

Natl. Gypsum Co.
Millington, N.J.

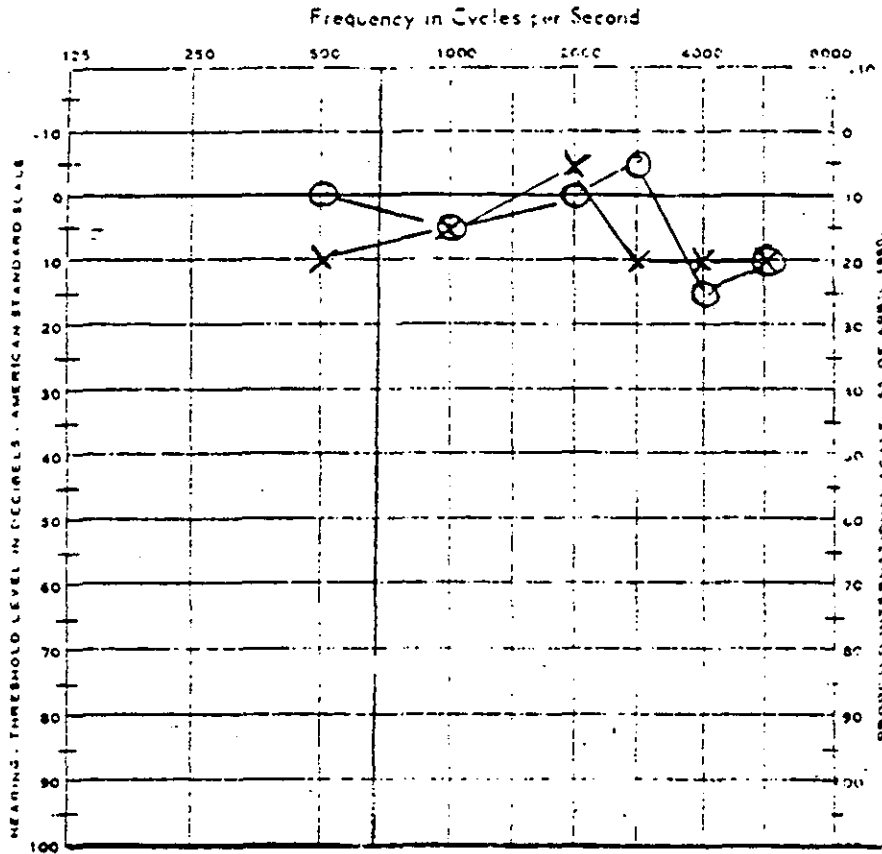
Interpretation of single roentgenogram
of chest taken on 9-16-53
compared with taken on

No abnormality seen other than a slight scoliosis of
the thoracic spine.

KK 1007

Date _____ Center No. _____
 Name _____ Age 47 Sex _____ Test No. _____
 Tested by REIL TENDER Audiometer _____ Estimated Accuracy: Good _____ Fair _____ Poor _____

PURE TONE AUDIOGRAM



Audiogram Code

	AIR				BONE	
	Un-aided	Masked	Masked	Masked	Masked	S/L
R	0-0	Δ-Δ	Δ-Δ	>->	>->	(-/-)
L	Δ-Δ	Δ-Δ	Δ-Δ	<-<	<-<	(-/-)

Average Loss A/C

Freq.	R	L
500		
1000		
2000		
Sum		
Avg.		

Additional Tests

SISI

FREQ	250	500	1000	2000	4000	8000
R						
L						

DISTORTED SPEECH TESTS

	Low	Faint	Comb.
R			
L			

SPEECH HEARING TESTS

Test	R	L
Sp. Reception Threshold (SRT)	db	db
Sp. Discrim. Scores (PB)	Quiet	%
	Noise	%

KK 1007 S

NATIONAL GYPSUM COMPANY

PHYSICAL EXAMINATION RECORD

HOURLY

DATE 10/6/66

PRI-EMPLOYMENT

REINSTATEMENT

PERIODIC HEALTH

NAME ADDRESS

BIRTH 8/24/14

AGE 51

SINGLE MARRIED OTHER

LAST EMPLOYMENT

PREVIOUS MEDICAL

RIGHT	DISFIGUREMENT - FACE, HEAD OR NECK	VISION - DISTANT with/without glasses	VISION - NEAR with/without glasses	BRASSERMAN
52	neg.	R.E. 20 L.E. 20 COLOR VISION	R.E. 20 L.E. 20	To let
LEFT	CONJUGATION	EXPANSION	HERNIA	ORIGINAL X-RAYS
52				neg.

ART	BLOOD PRESSURE	140/80	INGENAL RINGS	RT. Eng.
NGS	NO Change		R. minor	neg.
			OPERATIVE SCARS	neg.

MALE APPLICANTS - DATE OF LAST MENSTRUAL PERIOD MENSES

BACK AND EXTREMITIES - EDEMA, AMPUTATIONS, FUNCTIONAL DEFECTS, DEFORMITIES

neg.

HEARING Good

ADDITIONAL FINDINGS

NEUROLOGICAL

neg.

SKIN ERUPTION

neg.

GENERAL CONDITION: ☒ GOOD ☐ FAIR ☐ POOR EXAMINEE HAS BEEN ADVISED OF SIGNIFICANT FINDINGS ☐ YES ☐ NO

SUMMARY OF PERMANENT DEFECTS, IMPAIRMENTS

APPLICANT'S SIGNATURE (WRITE AND ON REVERSE SIDE)

EMOTIONAL STABILITY

INTELLIGENCE

DATE ASSIGNMENT

Acceptance - Reasons

Report

PHYSICIAN

COMPANY APPROVALS

DATE

PHYSICIAN EXAMINED

FIRM NO.

PERSONNEL
MANAGER
RECEIVED

X-RAY REPORT - RADIOGRAPHIC FINDINGS

DISTRICT
SALES
MANAGER

SALES
MANAGER

SALES
SUPERVISOR

KK 10/10/66

M.D.

U.S. GYPSUM COMPANY

NATIONAL GYPSUM COMPANY

PLANT, OFFICE, SALES DISTRICT Buffalo - Erie

PHYSICAL EXAMINATION RECORD

DATE 10-6-65☐ PRE-EMPLOYMENT ☐ REINSTATEMENT ☒ PERIODIC HEALTHNAME [redacted] ADDRESS [redacted]DATE OF BIRTH 8/24/14 (AGE 51)☒ SINGLE ☐ MARRIED ☐ OTHER [redacted]LAST EMPLOYMENT National Gypsum Company

HEIGHT <u>74"</u>	DISFIGUREMENT - FACE, HEAD OR NECK <u>no gross defects</u>		VISION - DISTANT C.R.E. 20/20	VISION - NEAR 20/	WASSERMAN <u>So lab</u>
WEIGHT <u>140</u>			U.I.E. 20/20	20/	URINALYSIS
HEART <u>no murmurs</u>	CHEST <u>Unequal</u>	HERNIA <u>Re. Surg. Hernia</u>	ABDOMEN <u>L.M.P.</u>		
CONFIGURATION CHEST EXPANSION <u>Unequal - Shrink at</u>		BLOOD PRESSURE <u>140/80</u>	INGUINAL RINGS <u>R. Hernia L. Normal</u>		NORMAL ENLARGED RELAXED
LUNGS <u>clear</u>		OPERATIVE SCARS			

BACK AND EXTREMITIES - EDEMA, AMPUTATIONS, FUNCTIONAL DEFECTS, DEFORMITIES

6" upper right quadrant scar
Left arm - pronated 30° due to fracture of arm in past.

IC FINDINGS - NEUROLOGICAL

neg.

SKIN ERUPTION

neg.SUMMARY OF PERMANENT DEFECTS, IMPAIRMENTS; EXAMINEE HAS BEEN ADVISED OF SIGNIFICANT FINDINGS ☒ YESShrink at hemi thorax due to childhood rickets.☐ NO

EMOTIONAL STABILITY

good

INTELLIGENCE

good

APPLICANT'S SIGNATURE

Accept ☐ Condit. ☐ AcceptReject ☐

PHYSICIAN'S SIGNATURE

G.M. Shuman

JOB ASSIGNMENT

PREVIOUS MEDICAL

COMPANY APPROVALS

DATE

PART EXAMINED

FILM NO.

PERSONNEL
MANAGER
BUFFALO

X-RAY REPORT - RADIOGRAPHIC FINDINGS

DISTRICT
SALES
MANAGERT
AGENCYSAFETY
SUPER.

KK 10015

V.D.

N.Y. and Rev. 5-64

NATIONAL GYPSUM COMPANY

Sales District _____

Office _____

Name _____

Address _____

Plant Millington, N.J.

to _____

Dept. _____

Check No. _____

Age 48

Color _____

S M W D*

Children _____

PHYSICAL RECORD (TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis _____

Epilepsy _____

Hernia _____

Operations _____

List on reverse side any hospital admissions in past 5 years.

Veneral Diseases _____

Tuberculosis _____

Liquor _____

Tobacco _____

Drugs _____

Other Illnesses _____

Injuries - description, location, % disability _____

Compensation Received _____

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity?

Last previous employment _____

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history)

Signature of Applicant _____

Witness _____

* If divorced, give date and place _____

PHYSICAL EXAMINATION (TO BE COMPLETED BY DOCTOR)

Height 6' 2"

Weight 142

Over Weight _____
Normal Weight ☒
Under Weight _____

Eyes: Right 20/20

Left 20/20

Corrected: Right _____

Left _____

Binocular Vision _____

Pupils ☒

Cornea ☒

Lungs ☒

Shortness of Breath none

Chest X-Ray _____

Heart ☒

Blood Pressure 136/82

Pulse 76

Ears ☒

Nose ☒

Teeth ☒

Throat and Tonsils ☒

Hearing: Right 7/2

Left 7/2

Abdomen ☒

Hernia ☒

Spine ☒

Hemorrhoids ☒

Extremities ☒

Scars ☒

(Note % of defects if any exist)

Musculature ☒

Skin ☒

Glands (Head and neck only - give location)

Genitals ☒

Reflexes ☒

Mentality ☒

Blood Test ☒

Urinalysis ☒

General Condition: Good ☒

Fair _____

Poor _____

Nutrition: Good ☒

Fair _____

Poor _____

Do you recommend applicant for work? ☒

Type of Work? _____

Remarks _____

APPROVED _____

FOREMAN _____

SAFETY SUPERVISOR _____

PLANT MANAGER _____

Date 6/12/63

Examined by Apf Bauman

M.I.

THIS EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ☒ NO ☐

NATIONAL GYPSUM COMPANY

Sales District _____

Office _____

Plant Millington, N.J.

Name _____

Address _____

Date 4/3/61

Dept. _____

Check No. 200

47

Color _____

W

S M W D*

Children _____

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis _____

Epilepsy _____

Hernia -

Operations _____

List on reverse side any hospital admissions in past 5 years.

Venereal Diseases _____

Tuberculosis _____

Liquor -

Tobacco _____

Drugs _____

Other Illnesses _____

Injuries - description, location, % disability _____

Compensation Received _____

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or insanity?

Last previous employment _____

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history)

Signature of Applicant _____

Witness _____

* If divorced, give date and place _____

PHYSICAL EXAMINATION (TO BE COMPLETED BY DOCTOR)

Over Weight ☒
Normal Weight ☒
Under Weight ☐

Height 6'2"

Weight 145

Eyes: Right 20/20

Left 20/20

Corrected: Right _____

Left _____

Bimocular Vision _____

Pupils ☒

Cornea ☒

Lungs ☒

Shortness of Breath _____

Chest X-Ray _____

Heart ☒

Blood Pressure 140/74

Pulse 144

Ears ☒

Nose ☒

Teeth ☒

Throat and Tonsils ☒

Hearing: Right 20/10

Left 20/10

Abdomen ☒

Hernia Bilateral Inguinal Hernia

Spine ☒

Hemorrhoids ☒

Extremities ☒

Scars ☒

(Note % of defects if any exist)

Musculature ☒

Skin ☒

Glands (Head and neck only - give location) ☒

Genitals ☒

Reflexes ☒

Mentality ☒

Blood Test ☒

Urinalysis ☒

General Condition: Good ☒

Fair _____

Poor _____

Nutrition: Good ☒

Fair _____

Poor _____

Do you recommend applicant for work? A

Type of Work? _____

marks

KK

APPROVED

FOREMAN

SAFETY SUPERVISOR

PLANT

MANAGER

Examined by

Date 4-19-61

THIS EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ☒ NO ☐

M.E.

NATIONAL GYPSUM COMPANY

Sales District _____

Office _____

Plant M11.

Name

Address _____

Date April 17, 1959

Dept. _____

Check No. _____

Age 44 Color W

S M W D

Children _____

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis _____

Epilepsy _____

Hernia _____

Operations _____

List on reverse side any hospital admissions in past 5 years.

Veneral Diseases _____

Tuberculosis _____

Liquor _____

Tobacco _____

Drugs _____

Other Illnesses _____

Injuries - description, location, % disability _____

Compensation Received _____

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity?

Last previous employment _____

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history)

Signature of Applicant _____

Witness _____

* If divorced, give date and place _____

PHYSICAL EXAMINATION (TO BE COMPLETED BY DOCTOR)

Over Weight _____
Normal Weight ☒
Under Weight _____

Height _____

Weight 140

Eyes: Right 25

Left _____

Corrected: Right _____

Left _____

Binocular Vision _____

Pupils _____

Cornea ☒

Lungs ☒

Shortness of Breath _____

Chest X-Ray _____

Heart 140 after exercise

Blood Pressure 110/70

Pulse _____

Ears ☒

Nose ☒

Teeth ☒

Throat and Tonsils ☒

Hearing: Right 25

Left 25

Abdomen ☒

Hernia no pulse at inguinal

Spine ☒

Hemorrhoids ☒

Extremities ☒

(Note % of defects if any exist)

Musculature ☒

Scars ☒

Glands (Head and neck only - give location)

Genitals ☒

Skin ☒

Reflexes ☒

Mentality ☒

Blood Test ☒

Urinalysis ☒

General Condition: Good ☒

Fair _____

Poor _____

Nutrition: Good ☒

Fair _____

Poor _____

Do you recommend applicant for work? ☒

Type of Work? _____

Remarks Heart seems fully compensated. Pulse about 84 in 2 minutes

APPROVED _____

FOREMAN _____

SAFETY _____

SUPERVISOR _____

PLANT _____

MANAGER _____

Examined by _____

Date 4.17.59

THIS EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ☒ NO ☐

KK

PHYSICAL EXAMINATION

CLOCK NUMBER 200

DATE June 8, 1957

NAME _____

ADDRESS _____

CITY _____

BLOOD TEST _____

EYES _____

EARS ☒ _____

NOSE ☒ _____

THROAT: ☒ _____

HEART ☒ _____

BLOOD PRESSURE 110/70

URINE ANALYSIS ☒ _____

X-RAY ☒ _____

REMARKS _____

At H. Buren
Physician's Signature

KK 2000

PHYSICAL EXAMINATION

MAY - 5 1950

CLOCK NUMBER 200

DATE 1/14/49

NAME _____

ADDRESS _____

CITY _____

BLOOD TEST _____

EYES Left 7 Right 6 Both 7

EARS ✓

NOSE ✓

THROAT: ✓

HEART x 5

BLOOD PRESSURE 155/95

URINE ANALYSIS -

X-RAY -

REMARKS _____

A. H. Bauman

Physician's Signature

KK 100-10

PHYSICAL EXAMINATION

CLOCK NUMBER 200

OCTOBER 1947

NAME _____

ADDRESS _____

CITY _____

BLOOD TEST: NEGATIVE ☒ POSITIVE _____

EYES: ☒ 20-20

EARS: ☒ _____

NOSE: ☒ _____

THROAT: ☒ _____

HEART: Enlargement of heart to left & right, moderate & gallop

BLOOD PRESSURE: 110/60

*diastolic
at 60*

URINE ANALYSIS: ☒ _____

X-RAY: ☒ _____

REMARKS: _____

At Baumer

Physician's Signature

KK 11-1000

Name

Plant: Millington, N. J.

No. 27628

Reading Date

4/22/72

Interpretation of Single

roentgenogram of chest

taken on

2/14/72

There has been an increase in the small rounded and irregular densities and the calcified pleuro plaque is again seen. The film is consistent with mixed asbestosis and silicosis. See previous report.

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland, Ohio 44104

KK : 13

Name

Plant: Millington, N.J.

No.

27628

Reading Date

11-13-70

Interpretation of

roentgenogram of chest

single

taken on

10-26-70

The film of this date again shows the calcified pleura plaque on the left. A review of his films from 1955 to date shows the development of barely discernible but definite increase of the bronchovascular markings with beading or branching densities in the upper half of both lungs. The films overall strongly suggest a mild lung reaction to a mixed exposure of asbestos and free crystalline silica. Does he have a history of such exposure? Thoracic scoliosis is again noted.

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland, Ohio 44104

KK 4-8001

Name

Plant: Millington, New Jersey

No. 27623

Reading Date 7-5-68

Interpretation of single

roentgenogram of chest

taken on 6-27-68

In addition to the prominent bronchovascular markings, thickened pleura and scoliosis previously described there are also irregular linear densities at the level of the mid-left lung which represent calcific pleura plaque formation. If he has a history of exposure to asbestos fiber, the plaques are likely associated/

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland, Ohio 44104

KK 427715

Name

Plant: Millington, N.J.

No. 27628

Reading Date 2-3-67

Interpretation of single

roentgenogram of chest

taken on 12-28-66

The bronchovascular markings are rather prominent especially on the left and the lungs appear unusually voluminous. The horizontal fissure is visible and there is moderate thoracic scoliosis. A comparison of this film with others going back to 1955 shows only a slight increase of the scoliosis and that the fissure became visible after 1962. The films suggest that he may have diffuse airway obstruction such as seen in anatomical emphysema and that in the last year or two he likely had pneumonia at sometime which caused pleurisy--now healed.

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland, Ohio 44104

*Notified by
XPR on 2-13-67
JLH*

*Tim
PUT IN - FILE*

KK 1111

Name  Plant: Millington, N.J.
No. 27628 Reading Date 6/8/64
Interpretation of single roentgenogram of chest
taken on 5/13/64

N The description of the film taken in 1960 is
the same as the present one. See previous
reports. There has not been a change.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 1200

Name Plant: Millington, N. J.
No. 30-62 Reading Date: 6/27/62
Interpretation of single roentgenogram of chest
taken on 6/21/62

No change when compared to previous reports.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 12 11

NGC

Name

Plant: Millington, New Jersey

No. 54-60

Reading Date: 4/20/60

Interpretation of single

roentgenogram of chest

taken on 4/1/60

compared with

taken on

A review of the films of '53, '55, and '57 together with the current one indicates that the vascular markings are somewhat prominent throughout both lungs. I don't consider this a new development. I doubt if this has any significance but would like a complete occupational history to evaluate this series of films.

Scoliosis of thoracic spine is again noted.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 7-10-10

Name: Plant: Millington, N. J. (NGC)
No. 43-57-B Reading Date: 1-13-58
Interpretation of Single roentgenogram of chest
taken on 12-30-57 compared with taken on

No change as compared to previous reports.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 2330

GEORGE W. WRIGHT, M. D.

DEPARTMENT OF
EXPERIMENTAL MEDICINE

January 16, 1956

ST. LUKE'S HOSPITAL
11311 SHAKER BLVD.
CLEVELAND 4, OHIO

No. 55-32-R
Name

National Gypsum Co. Interpretation of single roentgenogram
Millington, N. J. of chest taken on 12-5-55
compared with taken on 9-16-53

No change.

KK 1:11 1

GEORGE W. WRIGHT, M.D.

DEPARTMENT OF
EXPERIMENTAL MEDICINE

SAINT LUKE'S HOSPITAL
11311 SHAKER BLVD.
CLEVELAND 4, OHIO

No. 82
Name

Katl. Gypsum Co.
Millington, N.J.

Interpretation of single roentgenogram
of chest taken on 9-16-53
compared with taken on

No abnormality seen other than a slight scoliosis of
the thoracic spine.

KK 11-53

J. WILLIAM LITTLER, M. D.
14 EAST 90TH STREET
NEW YORK, N. Y. 10028
—
ATWATER 9-1121

August 7, 1968

Mr. Timothy Tolin
National Gypsum Company
Millington Plant
Millington, New Jersey

Re:

Dear Mr. Tolin:

I have recently examined the above 53 year old claimant whose right little finger was injured approximately two years ago when caught under a 100 lb. bay in the flexed position. Apparently the extensor tendon was ruptured from its insertion on the terminal phalanx. Because of his inability to extend the terminal phalanx an operation was carried out in October 1966 in an effort to restore tendon continuity. Kirschner wire fixation was used to immobilize the interphalangeal joints.

At the time of my seeing him the two interphalangeal joints could not be fully extended, each having a loss of approximately 35 to 40°. From these points—the proximal interphalangeal joints could be flexed and re-extended through an arc of 45° and the distal joint through an arc of 20°.

It is my opinion that no appreciable gain would be made through any further treatment and that the case should be closed.

Yours very sincerely,

J. Wm. Littler, M.D. /m
J. William Littler, M. D.

JWL:EM
enc.

KK : 10

September 7, 1966.

National Gypsum Company, Inc.
Division Avenue
Millington, New Jersey

Attn: Mr. Lawrence Grissim

Re:

Dear Mr. Grissim:

_____ came in to see me today complaining of inability to straighten his right little finger. He states that about one month ago the finger was bent under a heavy bag. He had no medical attention until about one week later.

Examination shows drooping of the terminal phalanx of the right little finger. There is mild swelling and tenderness over the distal interphalangeal joint. X-ray examination is negative.

In my opinion this patient has a so-called mallet finger with avulsion of the extensor tendon. No treatment is of any avail now except a surgical repair of the extensor tendon. The results of this operation are not one hundred percent and the patient would have to wear a splint or support to the finger for at least four weeks. The other approach would be to award him a small amount of disability (20% of the finger) and live with it. Since it is the little finger this would not be too bad a solution.

Thank you for sending this patient to see me.

Sincerely,

HFB:embr
Encl. 1 statement

Hugh K. Babbitt, M.D.

KK 1121

HUGH M. BABBITT, M.D., F.A.C.S.
880 PARK AVENUE
PLAINFIELD, NEW JERSEY

PHONE 9-6488

September 7, 1966.

National Gypsum Company, Inc.
Division Avenue
Millington, New Jersey

Attn: Mr. Lawrence Grissm

Re:

Dear Mr. Grissm:

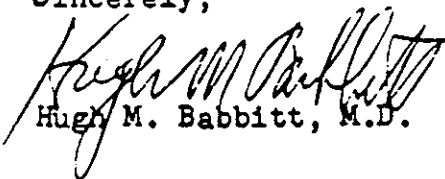
came in to see me today complaining of inability to straighten his right little finger. He states that about one month ago the finger was bent under a heavy bag. He had no medical attention until about one week later.

Examination shows drooping of the terminal phalanx of the right little finger. There is mild swelling and tenderness over the distal interphalangeal joint. X-ray examination is negative.

In my opinion this patient has a so-called mallet finger with avulsion of the extensor tendon. No treatment is of any avail now except a surgical repair of the extensor tendon. The results of this operation are not one hundred percent and the patient would have to wear a splint or support to the finger for at least four weeks. The other approach would be to award him a small amount of disability (20% of the finger) and live with it. Since it is the little finger this would not be too bad a solution.

Thank you for sending this patient to see me.

Sincerely,


Hugh M. Babbitt, M.D.

HMB:مبر
Encl. 1 statement

KK 11 35

HUGH M. BABBITT, M.D., F.A.C.S.
950 PARK AVENUE,
PLAINFIELD, NEW JERSEY

PHONE 6-6465

November 9, 1967.

National Typset Company
Millington, New Jersey 07946

Attn: Mr. Timothy J. Tolin

Dr.

Dear Mr. Tolin:

I examined _____ this morning at Muhlenberg Hospital. The patient was being readied for the operating room in order to repair a nevus.

As you recall he was operated on October 21, 1966 for a naillet finger of the right little finger. At the last time I saw him, on December 30, 1966, the terminal joint extended completely. However, today there is some drooping of the terminal phalanx. There is also loss of approximately 10% of extension of the proximal interphalangeal joint. This latter condition apparently annoys the patient. The patient has a good functional hand despite the little finger.

There is a tumor on the radial side of the right thumb about the size of a pea. It is movable and not particularly tender. It is a solid tumor of the order of a xanthoma. I think the tumor will enlarge further and probably should be removed. It is not connected to his work and not of possible.

A symplectomy could be performed on the right little finger at the proximal interphalangeal joint with the idea of increasing extension. As in all finger surgery results are not 100%. I think the more practical solution would be to accept permanent disability of the little finger which I should estimate is approximately 50% of the finger. If you and the patient decide to try to improve the finger, the only approach would be surgical.

I examined an x-ray of the finger taken at Muhlenberg Hospital this morning. This x-ray is normal.

Very truly yours,

HMB:mb
Encl. 1 statement

Hugh M. Babbitt, M.D.

KK 1/10/67

MARKET 3-3080

AUDIOMETRIC EVALUATION

Date

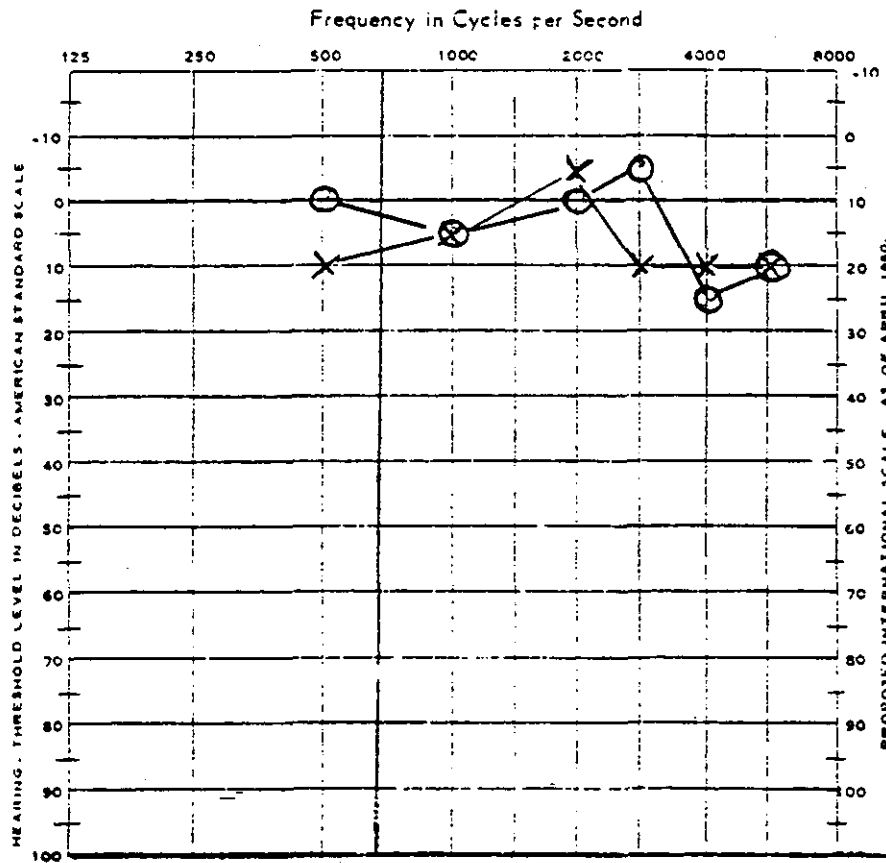
Center No. 9

Name

Age 47 Sex Test No.

Tested by Roll TENDER Audiometer Estimated Accuracy: Good Fair Poor

PURE TONE AUDIOGRAM



Audiogram Code

	AIR		BONE		S/L
	Un-Ear-masked	Masked	Un-Ear-masked	Masked	
R	O-O	Δ-Δ	□-□	>->	(-)
L	X-X	□-□	□-□	<-<	(-/-)

Average Loss A/C

Freq.	R	L
500		
1000		
2000		
Sum		
Avg.		

Additional Tests

SISI

FREQ	250	500	1000	2000	3000	4000	6000
R							
L							

DISTORTED SPEECH TESTS

	Low - Pass	Faint	Comb.
R			
L			

SPEECH HEARING TESTS

Test	R	L
Sp. Reception Threshold (SRT)	db	db
Sp. Discrim. Scores (PB)	Quiet	%
	Noise	%

KK 1137

NATIONAL GYPSUM COMPANY

☐ SALARIED PLANT, OFFICE, SALES DISTRICT Millington, NJ☒ HOURLY

PHYSICAL EXAMINATION RECORD

DATE 10/6/66☐ PRE-EMPLOYMENT ☐ REINSTATEMENT ☒ PERIODIC HEALTH

ADDRESS _____

DATE OF BIRTH 8/24/14 (AGE 51)☒ SINGLE ☐ MARRIED OTHER _____

LAST EMPLOYMENT _____

				PREVIOUS MEDICAL	
HEIGHT <u>6'2"</u>	DISFIGUREMENT - FACE, HEAD OR NECK <u>neg.</u>		VISION-DISTANT with, w/out glasses R.E. 20/ L.E. 20/ COLOR VISION:	VISION-NEAR with, w/out glasses R.E. 20/ L.E. 20/	WASSERMAN <u>To last.</u> Hb:
WEIGHT <u>152</u>					URINALYSIS <u>neg.</u> SUGAR ALBUMIN
CHEST	CONFIGURATION	EXPANSION	HERNIA <u>RT. Ing.</u>		
HEART	BLOOD PRESSURE <u>140/80</u>		INGUINAL RINGS R <u>Hernia</u> L <u>neg.</u>		NORMAL ENLARGED RELAXED
LUNGS	<u>No change.</u>		OPERATIVE SCARS <u>neg.</u>		

FEMALE APPLICANTS - DATE OF LAST MENSTRUAL PERIOD _____

MENSES _____

BACK AND EXTREMITIES - EDEMA, AMPUTATIONS, FUNCTIONAL DEFECTS, DEFORMITIES

neg.

HEARING

Good.

SPECIFIC FINDINGS - ADDITIONAL _____

NEUROLOGICAL

neg.

SKIN ERUPTION

neg.GENERAL CONDITION: ☒ GOOD ☐ FAIR ☐ POOR: EXAMINEE HAS BEEN ADVISED OF SIGNIFICANT FINDINGS ☐ YES ☐ NO
SUMMARY OF PERMANENT DEFECTS, IMPAIRMENTS: _____

APPLICANT'S SIGNATURE (HERE AND ON REVERSE SIDE) _____

EMOTIONAL STABILITY
GoodINTELLIGENCE
Good

JOB ASSIGNMENT

Accept ☒

Conditional Acceptance-Reasons _____

Reject _____

PHYSICAL CAPABILITY
Good

COMPANY APPROVALS

DATE

PART EXAMINED

FILM NO.

PERSONNEL
MANAGER
BUFFALODISTRICT
SALES
GERPLANT
MANAGERSAFETY
SUPER.

X-RAY REPORT - RADIOGRAPHIC FINDINGS

KK 10030

M.D.

NATIONAL GYPSUM COMPANY

PLANT, OFFICE, SALES DISTRICT Millington, Tenn.

PHYSICAL EXAMINATION RECORD

DATE 10-6-65☐ PRE-EMPLOYMENT ☐ REINSTATEMENT ☒ PERIODIC HEALTH

NAME _____

ADDRESS _____

DATE OF BIRTH 8/24/14 (AGE 51)☒ SINGLE ☐ MARRIED OTHER _____LAST EMPLOYMENT National Gypsum Company

HEIGHT <u>74"</u>	DISFIGUREMENT - FACE, HEAD OR NECK <u>no gross defects</u>	VISION-DISTANT C.R.E. <u>20/20</u> U.L.E. <u>20/20</u>	VISION-NEAR 20/ 20/	WASSERMAN <u>To lab</u>	Hb:
WEIGHT <u>140</u>				URINALYSIS <u>neg</u>	ALBUMIN <u>neg</u>
HEART <u>no murmurs</u>	CHEST <u>Unequal</u>	HERNIA <u>RC. Inq. Hernia</u>	ABDOMEN <u>L.M.P.</u>		
CONFIGURATION CHEST EXPANSION <u>Unequal - Shuler et</u>	BLOOD PRESSURE <u>140/80</u>	INGUINAL RINGS <u>R Hernia L normal</u>			NORMAL ENLARGED RELAXED
LUNGS <u>clear</u>		OPERATIVE SCARS			

BACK AND EXTREMITIES - EDEMA, AMPUTATIONS, FUNCTIONAL DEFECTS, DEFORMITIES

6" upper right quadrant scar
Left arm - Flexed 30° due to fracture of arm in past.

SPECIFIC FINDINGS - NEUROLOGICAL

neg.

SKIN ERUPTION

neg

SUMMARY OF PERMANENT DEFECTS, IMPAIRMENTS: EXAMINEE HAS BEEN ADVISED OF SIGNIFICANT FINDINGS

Shuler et Hernia due to childhood rickets.

YES

☐ NO

EMOTIONAL STABILITY <u>-good</u>	INTELLIGENCE <u>good</u>
APPLICANT'S SIGNATURE <u>[Signature]</u>	PHYSICIAN'S SIGNATURE <u>R.M. Shuler</u>
JOB ASSIGNMENT	PREVIOUS MEDICAL
COMPANY APPROVALS	DATE
PERSONNEL MANAGER BUFFALO	PART EXAMINED
DISTRICT SALES MANAGER	FILM NO.
PLANT MANAGER	
SAFETY SUPER.	

X-RAY REPORT - RADIOGRAPHIC FINDINGS

KK 12210

M.D.

NATIONAL GYPSUM COMPANY

Sales District _____

Office _____

Plant Millington, N.I.

Name _____

Address _____

Date _____

Check No. _____

Age 48

Color _____

S M W D*

Children _____

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis _____

Epilepsy _____

Hernia _____

Operations _____

List on reverse side any hospital admissions in past 5 years.

Veneral Diseases _____

Tuberculosis _____

Liquor _____

Tobacco _____

Drugs _____

Other Illnesses _____

Injuries - description, location, % disability _____

Compensation Received _____

Do you have a workman's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity?

Last previous employment _____

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history) _____

Signature of Applicant _____

Witness _____

* If divorced, give date and place _____

PHYSICAL EXAMINATION (TO BE COMPLETED BY DOCTOR)

Over Weight _____
Normal Weight ☒
Under Weight _____

Height 6' 2"

Weight 142

Eyes: Right 20/20

Left 20/20

Corrected: Right _____

Left _____

Bimocular Vision _____

Pupils ☒

Cornea ☒

Lungs ☒

Shortness of Breath none

Chest X-Ray _____

Heart ☒

Blood Pressure 136/82

Pulse 76

Ears ☒

Nose ☒

Teeth ☒

Throat and Tonsils ☒

Hearing: Right 7/2

Left 7/2

Abdomen ☒

Hernia ☒

Spine ☒

Hemorrhoids ☒

Extremities ☒

Scars ☒

(Note % of defects if any exist)

Musculature ☒

Skin ☒

Glands (Head and neck only - give location) _____

Genitals ☒

Reflexes ☒

Mentality ☒

Blood Test ☒

Urinalysis ☒

General Condition: Good ☒

Fair _____

Poor _____

Nutrition: Good ☒

Fair _____

Poor _____

Do you recommend applicant for work? A

Type of Work? _____

Remarks _____

APPROVED _____

FOREMAN _____

SAFETY SUPERVISOR _____

PLANT MANAGER _____

Examined by Dr. A. A. A.

Date 6/12/63

THIS EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ☒ NO ☐

NATIONAL GYPSUM COMPANY

Sales District

Office

Plant Millington, N.J.

Name

Address

Date 4/8/61

Dept.

Check No. 200

Age 47

Color

W

S M W D*

Children

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis

Epilepsy

Hernia

Operations

List on reverse side any hospital admissions in past 5 years.

Venereal Diseases

Tuberculosis

Liquor

Tobacco

Drugs

Other Illnesses

Injuries - description, location, % disability

Compensation Received

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity?

Last previous employment

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history)

Signature of Applicant

Witness

* If divorced, give date and place

PHYSICAL EXAMINATION
(TO BE COMPLETED BY DOCTOR)Over Weight
Normal Weight
Under Weight

Height 6'2"

Weight 145

Eyes: Right 20/20

Left 20/20

Corrected: Right

Left

Binocular Vision

Pupils ✓

Cornea ✓

Lungs ✓

Shortness of Breath

Chest X-Ray

Heart ✓

Blood Pressure 140/74

Pulse

144

Ears ✓

Nose ✓

Teeth ✓

Throat and Tonsils ✓

Hearing: Right 20/10

Left 20/10

Abdomen ✓

Hernia Bilateral Inguinal/Hernia

Spine ✓

Hemorrhoids ✓

Extremities ✓

Scars ✓

(Note % of defects if any exist)

Musculature ✓

Skin ✓

Glands (Head and neck only - give location)

Genitals ✓

Reflexes ✓

Mentality ✓

Blood Test ✓

Urinalysis ✓

General Condition: Good ✓

Fair

Poor

Nutrition: Good ✓

Fair

Poor

Do you recommend applicant for work? A

Type of Work?

Remarks

KK 1-10

APPROVED

FOREMAN

SAFETY SUPERVISOR

PLANT MANAGER

Examined by

Date 4-19-61

THIS EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ☒ NO ☐

M.

NATIONAL GYPSUM COMPANY

Sales District 15

Office _____

Plant M1.

Name _____

Address _____

Date April 17, 1959

Dept. _____

Check No. _____

Age 44

Color W

S M W D*

Children _____

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis _____

Epilepsy _____

Hernia _____

Operations _____

List on reverse side any hospital admissions in past 5 years.

Venereal Diseases _____

Tuberculosis _____

Liquor _____

Tobacco _____

Drugs _____

Other Illnesses _____

Injuries — description, location, % disability _____

Compensation Received _____

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity?

Last previous employment _____

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history)

Signature of Applicant _____

Witness _____

* If divorced, give date and place _____

PHYSICAL EXAMINATION (TO BE COMPLETED BY DOCTOR)

Over Weight _____
Normal Weight ☒
Under Weight _____

Height _____

Weight 145

Eyes: Right 20/20

Left 20/25

Corrected: Right _____

Left _____

Binocular Vision _____

Pupils ☒

Cornea ☒

Lungs ☒

Shortness of Breath _____

Chest X-Ray _____

Heart 140 after exercise

Blood Pressure 142/88

Pulse 84

Ears ☒

Nose ☒

Teeth ☒

Throat and Tonsils ☒

Hearing: Right 20/20

Left 20/20

Abdomen ☒

Hernia no pulsation or enlargement

Spine ☒

Hemorrhoids ☒

Extremities ☒

Scars ☒

(Note % of defects if any exist)

Musculature ☒

Skin ☒

Glands _____

(Head and neck only — give location)

Genitals ☒

Reflexes ☒

Mentality ☒

Blood Test ☒

Urinalysis ☒

General Condition: Good ☒

Fair ☒

Poor _____

Nutrition: Good ☒

Fair _____

Poor _____

Do you recommend applicant for work? ☒

Type of Work? _____

Remarks Heart seems fully compensated. Pulse returns to 84 in 2 minutes

APPROVED _____

FOREMAN _____

SAFETY SUPERVISOR _____

PLANT MANAGER _____

Examined by Dr. J. J. [Signature]

Date 4-17-59

THIS EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ☐ NO ☐

PHYSICAL EXAMINATION

CLOCK NUMBER 200

DATE June 8, 1951

NAME

ADDRESS

CITY

BLOOD TEST

EYES L - 20/20 R - 20/30

EARS ✓

NOSE ✓

THROAT: ✓

HEART ✓

BLOOD PRESSURE 148/52

URINE ANALYSIS ✓

X-RAY ✓

REMARKS

W. B. Quinn
Physician's Signature

PHYSICAL EXAMINATION

MAY - 5 1950

CLOCK NUMBER 200

DATE 1/14/49

NAME _____

ADDRESS _____

CITY _____

BLOOD TEST _____

EYES Left 9 Right 6 Both 7

EARS ✓

NOSE ✓

THROAT: ✓

HEART x 5

BLOOD PRESSURE 158/95

URINE ANALYSIS -

X-RAY -

REMARKS _____

KK

A. H. Bauman
Physician's Signature

751-20

HUGH M. BABBITT, M.D., F.A.C.S.
950 PARK AVENUE
PLAINFIELD, NEW JERSEY

PHONE 6-6465

November 9, 1967.

National Gypsum Company
Millington, New Jersey 07946

Attn: Mr. Timothy D. Tolin

Re:

Dear Mr. Tolin:

I examined this morning at Muhlenberg Hospital. The patient was being readied for the operating room in order to repair a hernia.

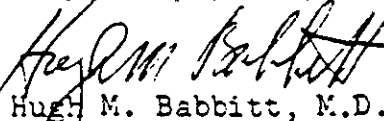
As you recall he was operated on October 21, 1966 for a mallet finger of the right little finger. At the last time I saw him, on December 30, 1966, the terminal joint extended completely. However, today there is some drooping of the terminal phalanx. There is also loss of approximately 10° of extension of the proximal interphalangeal joint. This latter condition apparently annoys the patient. The patient has a good functional hand despite the little finger.

There is a tumor on the medial side of the right thumb about the size of a pea which is movable and not particularly tender. It is a solid tumor on the order of a xanthoma. I think the tumor will enlarge further and probably should be removed. It is not connected to his work and not compensable.

A capsulotomy could be performed on the right little finger at the proximal interphalangeal joint with the idea of increasing extension. As in all finger surgery results are not 100%. I think the more practical solution would be to accept permanent disability of the little finger which I should estimate as approximately 50% of the finger. If you and the patient decide to try to improve the finger, the only approach would be surgical.

I examined an x-ray of the finger taken at Muhlenberg Hospital this morning. This x-ray is normal.

Very truly yours,


Hugh M. Babbitt, M.D.

HMB:mr
Encl. 1 statement

KK

Connecticut General Life Insurance Company

ATTENDING PHYSICIAN'S STATEMENT

(To be furnished without expense to the insurance company)

Patient's Name: _____

Nature of sickness or injury (describe complications, if any) Acute Low Back

Did this sickness or injury arise out of patient's employment? Yes _____ No ☒

If "yes," explain _____

Is disability due to pregnancy? Yes _____ No ☒

If "yes," what was the approximate date of commencement of pregnancy? _____ 19__

Nature of surgical or obstetrical procedures, if any (describe fully) _____

Date performed _____ 19__

Charge for this procedure \$ _____

Where performed _____ If in hospital, in-patient _____ out-patient _____

Give date of treatments:

Home _____

Office By Phone only

Hospital _____

The patient has been continuously disabled (unable to work) from _____ 12-30-69 _____ 19__

through _____ 1-12-69 _____ 19__

If still disabled, when should patient be able to return to work? 1-12-69 _____ 19__

Remarks _____

Date 1-21 _____ 19__ 70

Signed _____

(Attending Physician)

Degree _____

Address 726 Watchung Ave

Plainfield, N.J.

Phone 256-0500