Telephones: 767-6600 - 6601 - 6602 - 6603

DIRECTORS
ROBERT E. SOYD, M.D.
RICHARD THORS, M.D.
SENIOR CONSULTANT
PHILIP FALK, M.D.

CLEARING INDUSTRIAL CLINIC
5548 WEST SIXTY-FIFTH STREET
CHICAGO, ILLINOIS 60638

CORPORATE MEDICAL DIRECTOR

DATE October 18, 1983

AMERICAN CYANAMID CO.

WAYNE, NJ 07470

10-14-83	JOE BOYCE, JR. ... Physical Examination	$76.50

CYWI 3-001154

N14565

Request for
Physical Examination

CYANAMID

American Cyanamid Company
Central Medical Department

PART A

DATE: 10/13/83

TO: DR. Boyd
Clearing Industrial Clinic
Chicago, Il. 60638

YOU ARE AUTHORIZED TO PERFORM A
☐ PRE-EMPLOYMENT ☐ PERIODIC ☒ SPECIAL (Specify reason) High blood lead

PHYSICAL EXAMINATION ON
Boyce (Last Name) J. (First) (Initial)

SOCIAL SECURITY NUMBER
[redacted]

PRESENT, OR APPLIED FOR, POSITION/TYPE OF WORK: General Factory

AT (COMPANY LOCATION): 4500 West 15th Street

DIVISION: Polymer Products

DEPARTMENT: Polymer Chemicals

CHARGE CODE: 30-0299-0931

EXAMINATION REQUESTED BY (REQUESTER): H. C. Gaffney

REQUESTER'S TITLE: Plant Manager

TELEPHONE: 3120522-2200

REQUESTER'S COMPANY LOCATION: 4500 West 15th Street

SEND INVOICE TO (MAILING ADDRESS):
4500 West 15th Street
Chicago, Il. 60623

PART B — **PHYSICIAN'S REPORT**

DATE OF EXAMINATION: 10-14-83

CLASSIFICATION (Circle one): A B C D

WORK RESTRICTIONS (IF ANY): NONE

EXAMINING PHYSICIAN (TYPED): Robert E Boyd

EXAMINING PHYSICIAN (SIGNATURE): Robert E Boyd MD

INSTRUCTIONS

COMPANY REQUESTER

1. FULLY COMPLETE *PART A* AND SEND ORIGINAL AND *PARTS 2 & 3* TO THE PHYSICIAN.
2. SEND *PART 4* TO: CORPORATE MEDICAL DIRECTOR
   AMERICAN CYANAMID COMPANY
   ONE CYANAMID PLAZA
   WAYNE, NJ 07470
3. SEND *PART 5* TO THE APPROPRIATE ACCOUNTS PAYABLE DEPARTMENT SHOWN IN *PART A*.

CONFIDENTIAL INFORMATION REDACTED

PHYSICIAN

1. UPON COMPLETION OF EXAMINATION, COMPLETE *PART B* AND SEND ORIGINAL FORM TO THE REQUESTER INDICATED IN *PART A*.
2. SEND *PART 2* WITH YOUR INVOICE TO THE ACCOUNTS PAYABLE DEPARTMENT SHOWN IN *PART A*.
3. SEND *PART 3*, COMPLETED PHYSICAL EXAMINATION FORM, X-RAYS AND OTHER MEDICAL DATA AS IN THE PAST TO:

   CORPORATE MEDICAL DIRECTOR
   AMERICAN CYANAMID COMPANY
   ONE CYANAMID PLAZA
   WAYNE, NJ 07470

NA 255 Rev. 7/81 7/81 ORIGINAL 1

CYWI 3-001155
N14565.01

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CLEARING INDUSTRIAL CLINIC

5548 WEST SIXTY-FIFTH STREET
CHICAGO, ILLINOIS

CORPORATE MEDICAL DIRECTOR

AMERICAN CYANAMID CO.

WAYNE, NJ 07470

DATE October 18, 1983

10-14-83	CALVEN DAVIS..... Physical Examination		Tot	75.00

CYWI 3-001156

N14565.02