

FILE NAME: Owens-Corning (OC)

DATE: 1944 Nov 21

DOC#: OC096

DOCUMENT DESCRIPTION: Medical Records with Cover Letters for Albert Baumgardner

November 21, 1944



Mr. Edward C. Ames
Public Relations Manager
Owens-Corning Fiberglas Corporation
Nicholas Building
Toledo 1, Ohio

Dear Mr. Ames:

Mr. Albert Baumgardner of Holland, Ohio, has been a patient of mine for many years. He is approximately 55 years old, and during most of his adult life he has been a pipe coverer handling magnesia, asbestos and mineral wool products on industrial insulation jobs in and about Toledo.

During August 1944 he was under my care, and I hospitalized him in Mercy Hospital, Toledo. He was suffering from asbestosis, a condition that results from exposure to asbestos dust. The disease is a well recognized form of lung pathology that manifests itself in a diminution of lung capacity resulting in dyspnoea, or shortness of breath. This diagnosis is made through the use of X-rays, which were forwarded to me from an Akron hospital where Mr. Baumgardner had been treated some time before. His condition was complicated by a heart ailment which led me to advise him to leave his trade and seek work that was sedentary in nature so that he would not exert himself in such a manner that his heart would be unduly strained.

In my opinion his lung condition was not the result of exposure to Fiberglas materials, which he had been handling for a relatively short time before he left his trade. It is to be explained, rather, by his exposure to asbestos dust over a long period of years.

It is well established by the work of Dr. Leroy U. Gardner at Saranac and others that exposure to glass fibers involves no hazard to the lungs.

Yours very truly,

November 22, 1944

Dr. A. E. Canfield
627 Junction Avenue
Toledo, Ohio

Dear Dr. Canfield:

Recently we were informed by the Industrial Insulation Co., 1506 Erie Street, Toledo, that a member of the insulating crew employed by that company had left his trade because of bad health and had sought employment elsewhere. The man is Albert Baumgardner of Holland, Ohio.

We understand Mr. Baumgardner was a patient of yours, and for that reason we think you may be interested in a further report that has reached us about this case. The report may be entirely heresay, but we were told that there were statements made that Mr. Baumgardner believed his physical condition was due to his having handled Fiberglas insulation material on several jobs prior to his leaving his trade.

Naturally we are always anxious to clarify any mis-conceptions, and if there were a possibility of health hazard we would be very much concerned. Our experience with thousands of employees in daily contact for many years with Fiberglas has demonstrated that there are no ill effects from such exposure. We are wondering to what extent you can help clarify this situation, and if you can say whether contact with Fiberglas materials played any part in Mr. Baumgardner's condition.

Very truly yours,

Public Relations Manager

Edward C. Ames
dg

Toledo, Ohio

Mr. Edward C. Ames
Public Relations Manager
Owens-Corning Fiberglas Corporation
Nicholas Building
Toledo 1, Ohio

Dear Mr. Ames:

In reference to your letter regarding Mr. Albert Baumgardner of Holland, Ohio, I regret to see that there has been any belief that his condition could have been attributed in any way to handling or exposure to Fiberglas. This I don't believe to be the case, because as the work by Dr. Leroy U. Gardner of Saranac, and others, has indicated, exposure to glass fibers involves no hazard to the lungs.

I believe it is clear that Mr. Baumgardner's condition is due to other causes entirely.

(Note: Could it be properly added that such causes were due to exposure over a period of years to asbestos products which are quite different in physical character and have demonstrated themselves to cause asbestosis when subjected to an individual for long periods of time).

Very truly yours,

November 21, 1944

PLAINTIFF'S

EXHIBIT

428

Mr. Edward C. Ames
Public Relations Manager
Owens-Corning Fiberglas Corporation
K: olas Building
Toledo 1, Ohio

Dear Mr. Ames:

Mr. Albert Baumgardner of Holland, Ohio, has been a patient of mine for many years. He is approximately 55 years old, and during most of his adult life he has been a pipe coverer handling magnesite, asbestos and mineral wool products on industrial insulation jobs in and about Toledo.

During August 1944 he was under my care, and I hospitalized him in Leroy hospital, Toledo. He was suffering from asbestosis, a condition that results from exposure to asbestos dust. The disease is a well recognized form of lung pathology that manifests itself in a diminution of lung capacity resulting in dyspnoea, or shortness of breath. This diagnosis is made through the use of X-rays, which were forwarded to me from an Akron hospital where Mr. Baumgardner had been treated some time before. His condition was complicated by a heart ailment which led me to advise him to leave his trade and seek work that was sedentary in nature so that he would not exert himself in such a manner that his heart would be unduly strained.

In my opinion his lung condition was not the result of exposure to Fiberglas materials, which he had been handling for a relatively short time before he left his trade. It is to be explained, rather, by his exposure to asbestos dust over a long period of years.

It is well established by the work of Dr. Leroy U. Gardner at Sarnac and others that exposure to glass fibers involves no hazard to the lungs.

Yours very truly,

November 22, 1944

Zone 1

Dr. A. E. Canfield
627 Junction Avenue
Toledo, Ohio

Dear Dr. Canfield:

Recently we were informed by the Industrial Insulation Co., 1806 Erie Street, Toledo, that a member of the insulating crew employed by that company had left his trade because of bad health and had sought employment elsewhere. The man is Albert Baumgardner of Holland, Ohio.

We understand Mr. Baumgardner was a patient of yours, and for that reason we think you may be interested in a further report that has reached us about this case. The report may be entirely hearsay, but we were told that there were statements made that Mr. Baumgardner believed his physical condition was due to his having handled Fiberglas insulation material on several jobs prior to his leaving his trade.

Naturally we are always anxious to clarify any mis-conceptions, and if there were a possibility of health hazard we would be very much concerned. Our experience with thousands of employees in daily contact for many years with Fiberglas has demonstrated that there are no ill effects from such exposure. We are wondering to what extent you can help clarify this situation, and if you can say whether contact with Fiberglas materials played any part in Mr. Baumgardner's condition.

Very truly yours,

Public Relations Manager

Edward C. Amos
cg

Toledo, Ohio

Mr. Edward C. Ames
Public Relations Manager
Owens-Corning Fiberglas Corporation
Nicholas Building
Toledo 1, Ohio

Dear Mr. Ames:

In reference to your letter regarding Mr. Albert Baumgardner of Holland, Ohio, I regret to see that there has been any belief that his condition could have been attributed in any way to handling or exposure to Fiberglas. This I don't believe to be the case, because as the work by Dr. Lorey U. Gardner of Saranac, and others, has indicated, exposure to glass fibers involves no hazard to the lungs.

I believe it is clear that Mr. Baumgardner's condition is due to other causes entirely.

(Note: Could it be properly added that such cases were due to exposure over a period of years to asbestos products which are quite different in physical character and have demonstrated themselves to cause asbestosis when subjected to an individual for long periods of time).

Very truly yours,



Mercy Hospital

2200 Jefferson Avenue

Toledo, Ohio 43624

(419) 259-1500

DATE: July 31, 1985

REF: Albert H. Baumgartner
Medical Record No. 84334,
dated August 3, 1944 to
August 16, 1944 (Microfilmed).

TO WHOM IT MAY CONCERN:

I, Helen M. Lis of Mercy Hospital, Toledo, Ohio,
do hereby certify that the enclosed reports are true and complete copies
of the original records of this hospital; that they are prepared in the
usual course of business of Mercy Hospital; that the originals thereof
were made on or near the time of medical attendance and on the dates
stated therein.

I further certify that I am the custodian of the originals of these
records.

RESPECTFULLY SUBMITTED,

MERCY HOSPITAL

Helen M. Lis

Medical Records Department

hml
encl.

DISCHARGE, BLANK

ROOM No. 700

Name Mr. Albert H. Bengtson Address Rt. #1 Hollister
 Age 45 Sex M Religion Cath Occupation Refrigerator mechanic
 Cause of admission Heart trouble How Related Wife
 Physician A. E. Canfield Referred by _____
 Date of Admission 8/3/44 Date of Discharge 8/10/44
 Hospital Days 12 Telephone No Sec. 7-2812

To be filled in by Attending Physician

Chronic myocarditis and atrial fibrillation with
supraventricular fibrillation upon admission to hospital
Pulmonary embolism.

Associated Diseases _____

Complications developed in Hospital None.

Operations None.

Pathological Diagnosis _____

Condition on Discharge Much improved.

Cause of Death a Principal

b Contributory

This is to certify that I have reviewed the contents of this record and to the best of my knowledge
 it is accurate and complete

A. E. Canfield.
 Signature of Attending Physician

MERCY HOSPITAL
SURGICAL OR MEDICAL PERMIT

I, *Mr. Albert A. Baumgarten*
patient of Mercy Hospital, hereby consent to any surgical or medical procedure the Surgeon
or Physician may deem necessary

Signed *Albert A. Baumgarten*

Witnessed

Miss M. J. ... Date *8/3/44*

X-RAY REPORT

Memorial Hospital

11-12-41

3-1-42

10-1-42

From: Flat plate of the chest shows considerable general peri-bronchial increase throughout the lower two thirds, the apices being relatively clear. Apparently a chronic infectious process non-tubercular in origin. There is evidence of early bronchiectasis. Suggest lipiodol for further information.

R. Deming M.D.

PERSONAL HISTORY

3

Case No. 11-12-41

Name: 714 Albert Rosenzweig Address: 15th 1st ... Holland
 Age: 24 Occupation: _____
 Sex: M Nationality: _____
 Correspondent: Mrs. Evelyn Physician: Dr. Canfield
 Admitted: 5-3-44 How related: wife
 Referred by: _____
 Discharged: _____

Family

History: Age

Father

Mother

Brothers

Sisters

Father: _____
 Mother: _____
 Brothers: 1 - 1st Lieut.
 Sisters: _____

Chief Complaint

Dyspnea & Orthopnea - 5 yrs.
 Pt. (S) as above
 have been getting
 progressively worse
 for last 5 yrs.

Past History:

Surg. 0

Med. 0

CR - Per C.C.

GI - Ulcers

GU -) 0
 CR -
 M -

RECEIVED
 MAY 10 1944
 U.S. ARMY
 HOSPITAL

W. K.

Name Samuel Thompson Form No 328 Case No. _____

Temp _____ Height _____ Wt _____
Pulse _____ Chest _____
Resp: _____ Chest _____
B.P.S. _____ D _____

PHYSICAL FINDINGS

Gen.

W/D & W/P male
sitting up in bed.
slightly dyspneic.

Skin

Cool, moist.

Head

neck) Normal

Chest

Lungs. In basal rales.

Heart. Slightly enlarged
to left. S₁ &
apical (in at apex)
reg. rhythm.

Abd.

Essentially neg.

Es.

Stomach) Normal

Int.

Myocardial Enlarg.

Examined by W. H. W. 5

(2001)

Case: 328.

Diagnosis: Coronary artery disease. No. 2441

Date: 1-4-44

A. E. Campbell

Physical Exam:

History:

Clinical Exam:

Electrocardiographic Findings:

Accelerated fibrillation
Right axis shift

Myocardial damage

Clinical Comments:

E. E. Campbell

LABORATORY REPORT

Name of Patent

you select Baumgardner
DURENE

URINE

[illegible]

NCCD

[illegible]

Wm. B. B. B.

Aug 2 General appearance good, gave for slight dyspnea.
Patient is weak and has poor appetite. A. E. Carlisle

Aug 4 General condition about the same. A. E. Carlisle

Ref 44: Chronic interstitial pneumonia (cardiac)
Pneumothorax (left side) - (intercostal drainage)
Circulatory disturbance
And compensation on basis of
at this time after rest. No change at this
time. BP 120.

Suggested continued rest; digitalis only when
pulse rate is over 80. Continue treatment by
cardiac phosphatide for 24 hr for dyspnea
sodium through chest, both sides and
pad of chest each day while in hospital.

8/10/44 Patient is doing very well. Dyspnea has been
cleared up. Has no complaints. A. E. Carlisle

8/16/44 Patient's condition is very satisfactory and
has no complaints. No dyspnea present.
Patient is to be allowed to go home this
or thereafter when ready. A. E. Carlisle

1888 Mr. Albert Baumgartner ... 328 Th. ... A. E. Casfield

Ordered
Date

20 49 liquid diet

80. 2. Casfield 11/11
Soft and liquid diet. Back rest elevation as needed. Numbatal
at 9 P.M. tonight. Ely tomorrow A.M. Numbatal
X-ray of chest. A. E. Casfield

Numbatal q. 1/2 at 9 P.M. tonight. Omit night tray
etc. nearly. Light diet. A. E. Casfield

Coramine 2cc. with codeine phosphate q. 1/2 (discovered in
coramine) p. 1/2 for dyspnea. Diaphragm through
chest on both sides, not lower part, to be given once
daily while patient is in hospital. Ice 20g. 1/2
in 4hrs, only if pulse continued above 80, and if it
remained as at present do not administer digitalis. A. E. Casfield

May sit up in chair for awhile, afternoon and evening
with regular diet. A. E. Casfield

Visit may go home this noon. As for home
weekly for a time for diaphragm treatment. A. E. Casfield

CASE NO.

DATE

10-10-44

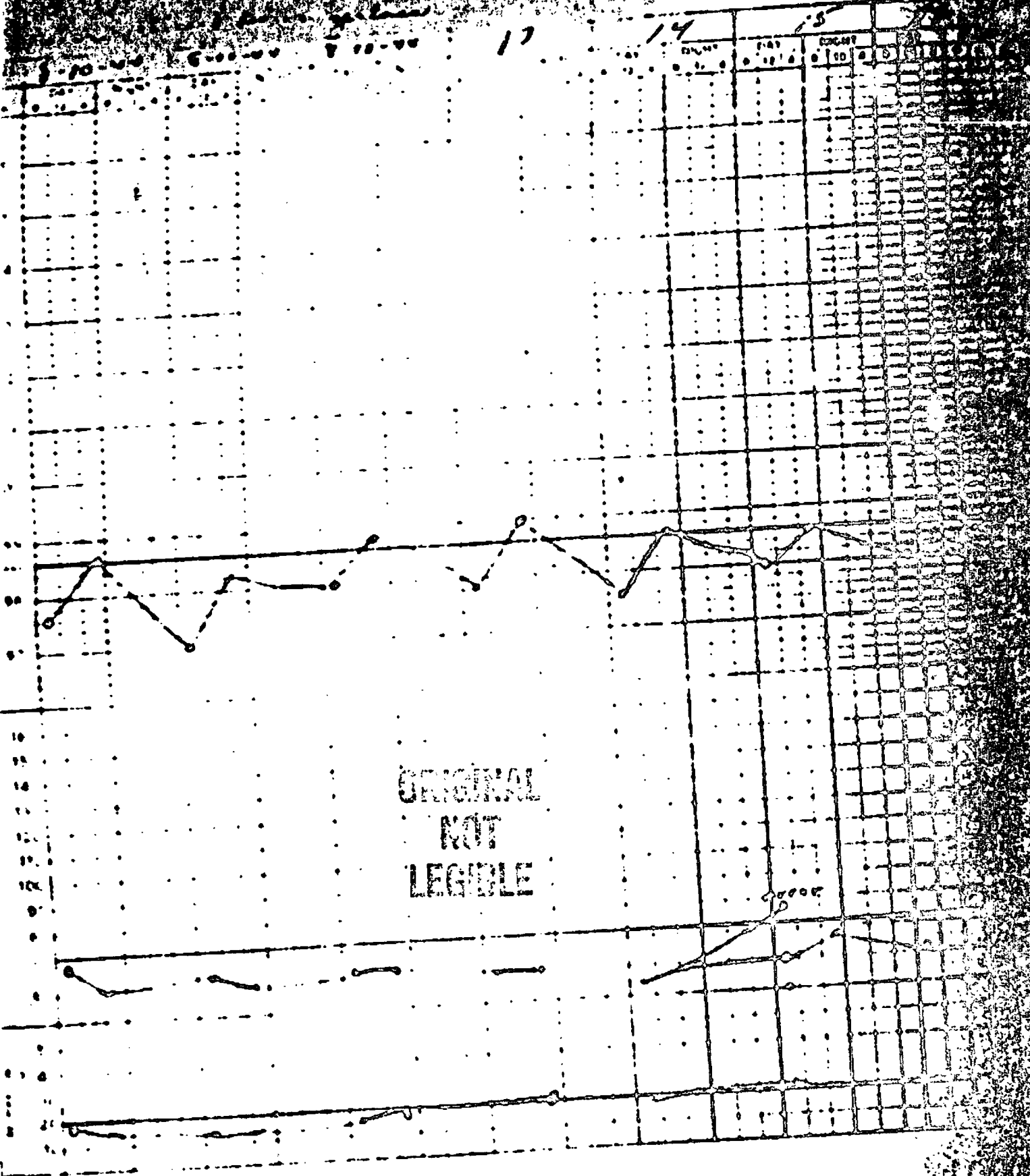
17

14

15

16

17



ORIGINAL
NOT
LEGIBLE