

[REDACTED] - 22 - Born Canada.

Father farmer. Mother and father alive and in good health.

2 sisters, 5 brothers. 2 sisters died at age of about one month - other living children born since.

Occupational

Butcher shop doing all kinds of cutting, etc. at age 14 - worked a year or more.

Tailor's helper - cutting - general helper - messenger boy, etc. - almost a year.

Then machine shop - running lathe and saw and planers - using iron and cast iron - steel, no brass no lead. 4 years.

Then horse dray driver - moving pianos, furniture, etc. 1 year.

Then for Forcier - truck driver - gasoline truck - delivering gasoline and oil - working here for about 18 months.

Began using Ethyl Gasoline five or six months ago. British American Company. Because of a lack of storage space all Ethyl Gasoline came in tank cars and was transferred into drums - this was done on three or four occasions at intervals of about three weeks. Transferring from tank cars done by Pierson.

Not on first occasion, he believes, but on second occasion of barrel filling he became dizzy while filling barrels. Went outside for fresh air and came back and finished. Was able to finish without fainting. Vomited next morning. After third time mixing became worse and began vomiting every time he smelled gas.

Sleeping badly during this time - had no frightful dreams. Roommate said he ground teeth and talked in sleep. Wakened tired. Had no appetite for breakfast but ate anyway. Had very bad taste in mouth - everything tasted same (while in hospital later taste in mouth was coppery). When he would get out his truck and smell gasoline became nauseated and lost entire breakfast.

After third trial at filling barrels became so bad he vomited every day. Then saw a doctor. At this time felt lazy, headache, spots in front of eyes - double vision, weakness of legs and arms, staggered or limped. Pains in arms and legs and back, with cramps in belly.

Doctor looked at him and decided he had lead poisoning but knowing nothing of exposure didn't see how it could be. Blood exam. showed stippling. Another doctor arrived at same conclusion without knowledge of exposure.

Went into hospital (got hair cut just before going but did not remember it till told by barber) September 14th; was in hospital 13 days.

For four days had pain in back and belly - after two days developed wrist drop. Arm also went numb. When back rubbed coppery taste appeared in mouth.

When dismissed from hospital did not work for a month. Visited Winnipeg for one week - to father's home. Still had cramps in belly. Had lost 12 lbs before going to hospital. Gained it back while in hospital and later. Now up to normal weight.

Returned to work two weeks ago - worked lightly - did little - went out once day with truck - not particularly sick from smell of gas.

One week ago last Friday boss away [REDACTED] went to work, taking out five loads of gas that day. Going home the cramps got him and could hardly straighten up. Took long time to go home (2 blocks), sat on steps and then later went in and had supper and then to bed. Cramps very severe on both sides down low.

Then came to Cincinnati.

Previous illnesses.

None - no doctor till present illness. No G.C. or Lues.

Present Symptoms.

When coming down on train right leg gave way and became numb. Right arm ached. Cramps in belly continued - soreness in back also. Much vile smelling flatus. Headache last night - began about 6 or 7 o'clock - gone when wakened. Given pills by nurse (for headache. Slept well. Present pains very indefinite.

PHYSICAL EXAMINATION

Temperature 98.4
Blood Pressure 110/74
Pulse 76

- EYES - Negative. Reflexes active.
- EARS - Negative entirely except for cerumen
- NOSE - Left inferior turbinate large, impinging on septum - fore, red and encrusted. Partial obstruction and some pain. Transillumination shows darkened left side in sphenoid region. Right side red but not anatomically abnormal.
- THROAT - Red all over, glairy and edematous, with post nasal exudate.
- Tonsils red, and contain pus, with small white spots at edges of crypts. Posterior glands on left somewhat sore
- CHEST - Heart and lungs normal.
- ABDOMEN - No midline tenderness or soreness on deep pressure. Soreness over caecum especially on deep pressure. Soreness especially on rolling sigmoid under fingers. Spleen and liver not palpable. Colon somewhat distended.
- Musculature of arms and hands and legs not grossly abnormal. No atrophy. No gross paresis (careful test needed.)
- REFLEXES - All normal - Eyes, face, tongue, biceps, triceps, abdominal, cremasteric, knee tendons and foot tendons.
- No abnormalities of sensation.

Note: The stool is soft and watery with excess of mucous. The stool is the type found in colitis. Detailed examination for blood, pus, parasites, and organisms indicated.

DIAGNOSIS: Primary gasoline intoxication with some susceptibility to vapors.

Sinusitis involving left ethmoid or sphenoid or both.