

DEC 21 1979
48,417

GJ



INTERNAL CORRESPONDENCE

MINING AND METALS DIVISION

P. O. BOX K, KING CITY, CALIFORNIA 93930

P.O. Box 599

To (Name) Mr. O. J. Malacarne
Division Metals Division
Location Grand Junction

Date December 19, 1979

Originating Dept.

Answering letter date

Subject

1cc Dr H.B. Rhodes
NIAGARA

2 FIL

Copy to R. J. Kronkhyte

Dear Rusty:

I am enclosing the 1979 results of the sputum cytology tests. Table I breaks the results down into age groups and into the smoking and non-smoking categories. I have also shown the employees in these categories that have greater or less than ten years of service. As in the past, the results are much better than that predicted by Dr. Saccomanno's data. However, when comparing the data for those greater and less than ten years of service there may be some information worth further consideration. We are showing no moderate atypicals in either category. However, there is a marked increase in the mild atypicals in both the smokers and non-smokers with over ten years of service. Table II shows the results comparing the greater than and less than ten year exposures for all employees and for only employees over 30 years of age (all the greater than ten year exposed employees are over 30). If, you would like further details on this data, I would be glad to supply them.

Very truly yours,

W.B.D. Atley
W. B. DeAtley

A07011

TABLE I
1979 SPUTUM CYTOLOGY RESULTS
Actual versus Predicted from non-miner
population tested by Dr. Saccomanno

Age Groups	Normal/Reg.		Atypical		Moderate		Group Totals
	Actual $\geq 10^*$	Pred. T	Actual ≥ 10	Pred. T	Actual ≥ 10	Pred. T	
<u>Non-Smokers</u>							
20	0	2	0	0	0	0	2
20 - 29	0	17	0	0	0	0	17
30 - 39	2	4	1	2	0	0	8
40 - 49	3	0	1	1	0	1	4
50 - 59	0	0	0	0	0	0	0
60 - 69	0	0	0	0	0	0	0
	5	23	2	3	0	2	31
<u>Smokers</u>							
20	0	0	0	0	0	0	0
20 - 29	0	7	1	1	0	0	8
30 - 39	5	9	0	11	0	1	15
40 - 49	1	3	2	4	0	2	7
50 - 59	2	2	0	3	0	2	6
60 - 69	1	1	1	1	0	1	3
	9	22	5	24	0	6	39
<u>Grouped Data</u>							
20	0	2	0	0	0	0	2
20 - 29	0	24	1	11	0	1	25
30 - 39	7	13	1	15	0	2	24
40 - 49	4	3	2	6	0	3	11
50 - 59	2	2	0	3	0	2	6
60 - 69	1	1	1	1	0	1	3
	14	45	8	37	0	9	71

* Years of King City Exposure

TABLE II
1979 SPUTUM CYTOLOGY RESULTS
Percentages versus Predicted from non-miner
population tested by Dr. Saccomanno

Groups	Normal/Regular (%)				Atypical									
	<10*		>10*		T*	P*	Mild (%)				Moderate (%)			
	<10*	>10*	T*	P*	<10	>10	T	P	<10	>10	T	P		
<u>Non-Smokers</u>														
All	95	71	90	52	5	29	10	42	0	0	0	6		
Over 30	80	71	75	42	20	29	25	50	0	0	0	8		
<u>Smokers</u>														
All	88	64	77	23	12	36	23	61	0	0	0	15		
Over 30	88	64	77	19	12	36	23	62	0	0	0	19		
<u>Total</u>														
All	92	64	84	35	8	36	16	53	0	0	0	12		
Over 30	86	64	75	26	14	36	25	58	0	0	0	15		

* <10 = Less than 10 years at King City.

>10 = Greater than 10 years at King City.

T = Total

P = Predicted

A07013

JOHN J. WELSH. M. D.
Tel. 551-3101

Dear Mr. Larrison:

I wrote this letter to
Dr. Jacobson because I had been
unable to contact him by phone.
However, I finally reached his
secretary to phone. I mailed
him the letter anyway.

J.J.W.

6/7/74

A07016

UCC 020750



June 7, 1974

George Jacobson, M.D.
Professor and Chairman
Department of Radiology
University of Southern California
1200 North State Street
Los Angeles, California 90033

Re: Mr. E. J. Sinclair
Mr. E. M. Grab

Dear Doctor Jacobson:

You will recall having seen x-rays on Mr. E. J. Sinclair and Mr. E. M. Grab, who are employees at a Union Carbide asbestos mill at King City, California. Your report to me dated May 8, 1974, indicated that on the basis of the roentgenograms I had sent you there were no changes indicative of asbestosis or obstructive airway disease in either case.

I have just been informed that an x-ray taken recently on Mr. Sinclair has been diagnosed as asbestosis by the roentgenologist at the George L. Mee Memorial Hospital in King City. He also stated that he had not yet received the x-rays from your office.

Therefore, I have asked that the new roentgenogram on Mr. Sinclair be sent to you and am requesting that you review it and send your report and the bill to me. Also, may I ask that your office check to see that the new film as well as the old films are returned to the George L. Mee Memorial Hospital in King City.

Thank you for your assistance in this matter.

Very truly yours,

John J. Welsh, M.D.
Corporate Medical Director

JJW:BA

cc: Mr. F. H. Larrison

A07017

UNIVERSITY OF SOUTHERN CALIFORNIA
SCHOOL OF MEDICINE
2025 ZONAL AVENUE
LOS ANGELES, CALIFORNIA 90033

IN REPLY REFER TO:
DEPARTMENT OF RADIOLOGY
1200 NORTH STATE STREET
LOS ANGELES, CALIFORNIA 90033

TELEPHONE:
CAPITOL 5-3131

June 14, 1974

John J. Welsh, M. D.
Corporate Medical Director
Union Carbide Corporation
270 Park Avenue
New York, New York 10017

RE: E. J. Sinclair
E. M. Grab

Dear Doctor Welsh:

As soon as I received your letter of June 7, my secretary went to our hospital's mail room and much to my embarrassment learned that they had not gotten around to mailing the previous chest roentgenograms of Mr. Sinclair and Mr. Grab until June 6. My sincerest apologies.

I have reviewed the new chest roentgenograms of Mr. Sinclair and Mr. Grab, both dated May 6, 1974.

SINCLAIR: There is a density in the right cardiophrenic angle which requires actual comparison with the previous chest films to determine whether it is of recent origin. I doubt that it is of clinical significance. Again, however, I see no changes to suggest asbestosis or any other form of pneumoconiosis.

GRAB: This chest roentgenogram does not differ from the description of the previous ones. I see no evidence of asbestosis or any other pneumoconiosis.

Thank you again for the opportunity of reviewing these cases. They are being mailed to the George L. Mee Memorial Hospital in King City today by my secretary personally and I trust that they will be delivered promptly.

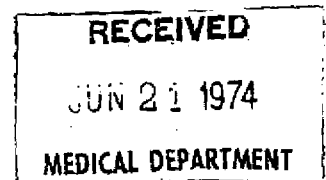
Please let me know if I can be of further assistance.

Sincerely yours,

George Jacobson, M. D.
Professor and Chairman
Department of Radiology

GJ/bc

407018



UCC 020752

FROM Dr. Welsh DATE 6-24-74
LOCATION _____ TO King City
SUBJECT _____ LOCATION _____

Enclosed find exam records for:

1. E. Gzab - Lung function and recheck,
2. J. S. Sousa - New hire terminated on "X" ray result,
3. R. M. Rocha - New hire terminated on Pulmonary Function result,
4. M. Szelez - Pre-employment Pulmonary and re-check,
5. T. Keyza - Pre-employment Pulmonary and recheck.

REPLY IN SPACE BELOW. DETACH AND RETURN THIS COPY TO ORIGINATOR. RETAIN ORIGINAL.

I am sending these following discussion with E. A. Prosser.
Mr. Szelez was the individual Prosser called you about. I
have hired both men.

Steve Harrison

TRIPPLICATE

A07019

6-21-74

Dr. Welsh -

X ray chest w/ other scans, Dr. Williams

Dr. Williams -

Are sending lung function tests to Gabe to Dr. Welsh -

Mr. F. H. Larrison, Jr.

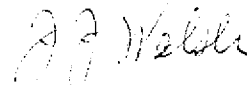
March 4, 1976
Page 2

Jim Stanford should be advised not to continue smoking since his lung function is not as good as it should be. There is no evidence of disease in his case, however.

George Larson has a borderline lung function test, and there is an indication that he may be developing emphysema in spite of the fact that he is a non-smoker. He, too, should be examined more frequently than the rest, perhaps every nine months. He should be advised about wearing his respirator in dusty areas.

Ernest Long Smokes a pack of cigarettes a day and has started to show evidence of lung disease, probably because of his smoking. We have no evidence whatsoever that his pulmonary function has been reduced by his work with asbestos. However, if he continues in that job and does not wear respiratory protection, he runs a risk of aggravating his lung condition. He should be warned about smoking and should be examined every nine months.

Very truly yours,


John J. Welsh, M.D.

JJW:BA

407015



INTERNAL CORRESPONDENCE

UNION CARBIDE CORPORATION

270 PARK AVENUE, NEW YORK, NEW YORK 10017

To (Name) Mr. F. H. Larrison, Jr.
 Division Metals Division
 Location P.O. Box K
 Floor Number King City, California 93930

Date March 4, 1976
 Originating Dept. Medical Department
 Floor Number 4th Floor

Copy to

PERSONAL AND CONFIDENTIAL

Answering letter date

Subject

Dear Mr. Larrison:

This is to report medical impressions based on my visit to King City and the information contained in the physical examination reports of some of the employees.

I was disappointed to note that the amount of asbestos dust in the plant seems about the same as it had been on previous visits, and I noted that asbestos dust is still being tracked into the office area. Also, from what you told me, it appears that the employees are not taking advantage of the showers and change of clothes which have been provided for them. All of this adds up to a considerable concern on my part for the health of the employees at King City.

Even if improvements are made in the dust situation in the future, I would recommend an annual physical examination for all employees (including office workers) to include general physical, complete blood count, urinalysis, chest x-ray, and, for those who are in the dusty plant areas, pulmonary function tests.

Further
 on a part
 tions him

As re
 abnormal f.
 function te
 advised aga
 exposed to a

his lung condition does not appear to have been caused by his work; but he should be aware that asbestos dust or any dust will aggravate his lung condition. He should be especially watched by his own physician because of high blood pressure, and he should be examined about every six months.

will be necessary to employ one physician
 isis so that he would do most of the examina-
 others which were done by someone else.

Sinclair should be informed that he has
 y as well as evidence in the pulmonary
 obstructive lung disease. He should be
 sure that he wears the proper mask when
 (or any dust for that matter). He should also be
 his lung condition does not appear to have been caused by his
 work; but he should be aware that asbestos dust or any dust will aggravate his
 lung condition. He should be especially watched by his own physician because
 of high blood pressure, and he should be examined about every six months.

continued

A07014