Apr.20, 1933

Lead poisoning

$30.00

QUESTION: Compensability.

* * * * * * * * * * *

On May 26th, 1933, claimant filed an O.D.4 application alleging that in April, 1933, the symptoms of loss of appetite, weakness of legs and arms were noted, as a result of which he was compelled to quit work May 10th, 1933; that for twenty-five years he had been engaged in the occupation of printing and typesetting and for four years last past he had worked for the above concern, The Review Publishing Company of Lockland, Ohio. The employer certified this application and on same Dr. Bragg, states that on May 10th, 1933, he examined claimant and found him to be suffering with loss of appetite, weakness of arms and legs, wrist drop, demarkation of gums. He states he made a diagnosis of lead poisoning.

The next data we have is a report from this physician under date of July 4th, 1933, wherein he states that on May 10th, 1933, he examined the claimant and found him to have typical symptoms of lead poisoning, a typical wrist drop and weakness of all of the extensor muscles of the arms and legs - a very distinct blue line on his gums and a peculiar anemic condition that is seen in lead poisoning. With the history of his occupation as a printer and using lead type,

he felt that it was not fair to ask claimant to finance a blood examination. However, examination of the urine showed that the same contained a trace of lead. He further states that he saw claimant yesterday, (July 3rd, 1933) and that he was very much improved.

The data has been reviewed by Dr. Parker, who has approved the claim as a lead poisoning case and recommended temporary total for six weeks with further compensation in accordance with medical reports from the attending physician.

CONCLUSION:

It is concluded that claimant in all probability did contract lead poisoning while in the employ of the above concern as a printer and typesetter, having been engaged in this occupation for twenty-five years and in the employ of the above concern for four years, but inasmuch as he states the symptoms which he now has were first noted on April 20th, 1933, it seems somewhat peculiar to the writer that the symptoms would come on so suddenly as claimant alleges, where he had been exposed, apparently to the same degree for a number of years. For this reason it is felt it would be advisable to refer claimant to a specialist before further consideration is given the above numbered claim.

RECOMMENDATION:

The data has been reviewed by Dr. Parker, who has approved the claim as a lead poisoning case and recommended temporary total for six weeks with further compensation in accordance with medical reports from the attending physician.

CONCLUSIONS:

It is concluded that claimant in all probability did contract lead poisoning while in the employ of the above concern as a printer and typesetter, having been engaged in this occupation for twenty-five years and in the employ of the above concern for four years, but inasmuch as he states the symptoms which he now has were first noted on April 20th, 1933, it seems somewhat peculiar to the writer that the symptoms would come on so suddenly as claimant alleges, where he has been exposed, apparently to the same degree for a number of years. For this reason it is felt it would be advisable to refer claimant to a specialist before further consideration is given the above mentioned claim.

RECOMMENDATION:

That the claim be continued and claimant referred to a specialist for a thorough examination concerning the possibility of his having contracted lead poisoning while in the employ of the above concern. After said report is contained in the file, the claim to be again submitted upon a statement of facts.

* * * * * * *

PREPARED BY: L.L.BRANDENBURG/CEW DATE July 17, 1933.

LLOYD D. TEETERS, CHIEF
DIV. OF COMPENSATION

H. H. DORR, M. D.
CHIEF MEDICAL EXAMINER

THE INDUSTRIAL COMMISSION OF OHIO
MEDICAL DIVISION
COLUMBUS

August 16, 1933

Dr. R. A. Kehoe,
University of Cinn.,
College of Medicine,
Cincinnati, O.

CLAIM NO. O.D.10134
NAME [redacted]
ADDRESS Jackson Place,
Lockland, O.

Dear Doctor:

We are referring the above claimant to you for examination, report and opinion as to whether or not claimant is suffering from lead poison.

You may notify the claimant at the address as given when to appear at your office for this purpose.

We are enclosing, herewith, Statement of Facts, which will give you a history of the case, as shown by our files.

Kindly send your report in triplicate, together with your fee bill, direct to the Medical Department as soon as possible.

Very truly yours,

H. H. DORR, M. D.,
CHIEF MEDICAL EXAMINER.

Copy to
claimant.

DR. W. E. ELDER
eh

Med. 11—2M—11-32.

KE 0016629

N19399.01