



INTERNAL CORRESPONDENCE

MAR 18 1983

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SILICONES & URETHANE INTERMEDIATES P. O. BOX 8361, SOUTH CHARLESTON, WEST VIRGINIA 25303

To (Name) C. E. Fry
Division R. W. Holland, M.D.
Location A. A. Lang, M.D.
H. C. Lewinsohn, M.D.
L. E. McClure
J. B. Mickey
A. G. Olds
F. M. Plechaty, R.N.

Date March 17, 1983
Originating Dept. Safety & Health
Subject Asbestos-Related Medical Issues

Copies: R. N. Bates
A. W. Boyd
L. F. Doyle
T. E. Lawrence
T. A. Lincoln, M.D.
R. G. Link
D. G. Moshier

PLAINTIFF'S EXHIBIT

UC-3616

I would like to convene a meeting of the addressees at South Charleston, Building 3005-228 at 10:00 a.m. on Tuesday, March 29th for the purpose of discussing asbestos-related medical issues. I hope that Art Olds' replacement will be able to attend, as well as Sistersville's contract physician, Dr. Boone.

It is my expectation that together, with technical assistance from Drs. Lewinsohn and Lang, we can develop agreement on procedures to be followed at our Division's two major plants with respect to the diagnosis and reporting of asbestos-related illnesses. Such procedures may then be reviewed by location and Divisional management for their approval and adoption at all S&UI facilities.

Dr. Holland at South Charleston has developed and has been following certain practices with respect to the diagnosis of asbestos-related disorders which seem to be adequate and appropriate. I would like to have us review these practices and assess their applicability to Sistersville and other S&UI locations.

Our discussion should include the following elements:

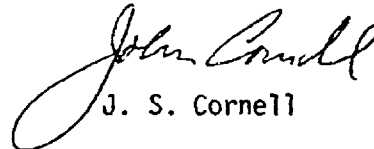
1. Review by Dr. Holland of current diagnostic practices at South Charleston. What is normal course of X-Ray reviews, what resources are employed, what decision-making process is followed in determining that an asbestos-related illness is to be reported?
2. Are South Charleston's diagnostic practices and resource employment appropriate for use at Sistersville and other S&UI locations? What amendments, if any, can be suggested?
3. What terminology is presently used in reporting asbestos-related disorders? What terminology should be employed to be medically accurate as well as supportable from an ER viewpoint? Dr. Lewinsohn will propose standardized reporting terminology for our consideration.
4. In conclusion, what practices or procedures related to the diagnosis and reporting of asbestos-related illnesses should be presented to our management for review and approval for general use within the Division?

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Asbestos, its hazards, and the variety of regulatory requirements attending the handling of this material are a very large and complex set of issues for discussion. Covering all the issues related to asbestos is beyond the scope of the proposed meeting. My hope is that we can deal effectively with the manner in which we should diagnose and report asbestos-related illnesses, leaving other asbestos issues to be dealt with separately.

We should be done with our meeting by lunchtime or early afternoon. I will arrange to have lunch brought in so that we can conclude our discussion as early as is possible.

Very truly yours,



J. S. Cornell

JSC:ke
Ext. 2618