April 8 1935

Re: [redacted]

Employer: (Civilian) Wright Field
Dayton, Ohio

Present Illness

Began last November with dizzy spells, giddiness, nervousness, insomnia at times and fatigue early in afternoon - This became increasingly worse until about three weeks ago when he became so dizzy he fell while at work - at this time he was dizzy but did not lose consciousness - in general he has been sleeping well but states on more than one occasion recently has to get up & pace the floor - notices he is nervous. His appetite is good and there has been no loss of weight - No headaches - has been becoming more and more deaf in [illegible] ear. He relates that about a month had for a day some vague abdominal pain which promptly disappeared. No disorder, little if any nausea or indigestion and not constipated. No [illegible] organs or symptoms referable to cardiac or respiratory system. Genito urinary system negative no history venereal disease. No arthritis or neuritis - no muscle pain.

N8184

KE 0011074

In general he is well developed, well nourished and presents a healthy appearance - color good - not acutely sick -

Eyes: Pupils eq - reg - react well to l+a. Extra ocular muscles ok -

Ears: Both drums appear somewhat thickened but intact - canals clear - Hearing impaired apparently about 25% hearing in left and 50% rt -

Nose: Septum thick - turbinates large - thick mucous

Throat: Teeth have moderate filling but are fairly good - gums appear ok - no lead lines - tongue in midline and no tremor Pharynx is injected - tonsils medium sized left larger than rt and show chronic infection - anterior pillars injected -

Glands: no adenopathy -

Heart: normal in size - rate & rhythm regular - no murmurs Sounds are of good quality and no murmur heard. BP 117/84

Chest: Expansion is equal & fairly good - clear to p & a

Abdomen: Appendectomy scar lower rt with hernia at lower margin size of egg easily reduced - Liver & spleen not felt No pain or tenderness - No inguinal hernia -

Extremities: appear normal -

KE 0011075

[illegible] work he is now doing. He first (1½ yrs) has been doing some work which is setting up motors on block, doing some assembling, and testing motors. Had usual childhood diseases - no serious injury in past, no other recent illness - operated some time ago appendectomy in which scar he now has a post-operative hernia required to state on present job during unusual exertion -

Exposure to Pb:

only in occasionally washing hands and parts in leaded gasoline (there is a rule that non-leaded gasoline be used for washing parts & hands and the gasoline is available according to foreman (Mr Brusse) He occasionally spills gasoline on hands in installing & removing carburetors - No contact with concentrated fluid and washes gasoline from hands after exposure - Very little exposure to ~~Pb~~ carbon monoxide or other combustion vapors and no other ~~fumes~~ vapors or chemicals in building.

KE 0011076

hemolysis: neg for all 4 organs

staple count -

Blood sample obtained for pt determination -

Jar + jar left for specimens -

Impression:

1) This individuals present condition is due to the effect of the constant noise in the lecture room

2) That lead in the gasoline used to wash parts and the hands is insignificant as a causative factor

3) That carbon monoxide or gasoline vapors are not present in sufficient concentration to be a causative factor

It has been shown that any interference with the impulses originating in the semi circular canals or by damage to the auditory may well cause - - the faculty may be temporarily due to nerve fatigue.