

Name

No. 36446

Interpretation of single

taken on 9-4-68

Plant Millington, N.J.

Reading Date 10-1-68

roentgenogram of chest

Retired

*film
in
storage
phys
pack*

The bronchovascular markings are unusually prominent and there are irregular, nodular densities in both lungs, especially on the right. The lung roots are larger than normal. Diaphragmatic adhesions are present on both sides. These changes have developed gradually over the years from "normal" in 1953 - there has been definite further changes since the last film. The appearance of this film suggests a mixed exposure to asbestos and to silica. An occupational history is needed to make a diagnosis more certain, but silicosis and asbestosis must be strongly considered.

THIS MAN WAS SHOWN ON
1968 PLANT TERMINATED LIST.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland, Ohio 44104



KK-2556

Name

Plant: Millington, New Jersey

No. 36446

Reading Date 7-27-66

Interpretation of single

roentgenogram of chest

taken on 6-29-66

A comparison of this film to that
of 1964 shows no further change. Previous
comments still apply.

L.H.

Repeat if new
7/29

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland, Ohio 44104

*has been
in July
list*

KK 123-57

Name

Plant:

Millington, N.J.

No.

27613

Reading Date

6/16/64

Interpretation of

single

roentgenogram of chest

taken on

5/12/64

W. W. Wright
W. W. Wright
A comparison of films 1953 to date shows development of pleural densities sometime between 1957 and 1960, mostly on right. More ~~xxx~~ recent there have been minor pleural changes on the left. If he has an asbestos exposure it is imperative that a diagnosis of asbestosis be considered

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland 4, Ohio

KK 22058

Name

Plant: Millington, N.J.

No.

53

Reading Date: 8/29/62

Interpretation of

single

roentgenogram of chest

taken on

8/3/62

The single film shows no change from previous ones of 4/14/60 and a stereo pair of 5/10/60. There is evidence of a right side pleural reaction with some intraparenchymal change suggesting the residue of a previous pneumonia. Film of 9/24/59 did not show these change. Is there a history of "pleurisy" or pneumonia between 1957 and 1960?

*Please let me
know the answer
to this question*

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 12859

NGC

Name

Plant: Millington, New Jersey

No. 83-60

Reading Date: 5/2/60

Interpretation of single

roentgenogram of chest

taken on 4/14/60 compared with

taken on

A review of films taken in 1953, 1955, 1957, and the current one shows the gradual development of what appears to be pleural adhesions at the right base. It is impossible to know whether or not there is any abnormality within the lung by looking at this single film. A stereo film and information re his medical history of the past 3 or 4 years would be of help in evaluating this films.

*Please have stereo made
and send medical history*

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 12860

GEORGE W. WRIGHT, M. D.

DEPARTMENT OF
EXPERIMENTAL MEDICINE

ST. LUKE'S HOSPITAL
11311 SHAKER BLVD.
CLEVELAND 4, OHIO

12-17-55

No. 55-53-B_____
Name

Natl. Gypsum Co.
Millington, N. J.

Interpretation of ^{single} ~~10-24-55~~ roentgenogram
of chest taken on
compared with 1953 taken on

No change.

KK 12861

GEORGE W. WRIGHT, M.D.

a

DEPARTMENT OF
EXPERIMENTAL MEDICINE

SAINT LUKE'S HOSPITAL
11311 SHAKER BLVD.
CLEVELAND 4, OHIO

No. 93
Name

Natl. Gypsum Co.
Millington, N.J.

Interpretation of single roentgenogram
of chest taken on -9-16-53
compared with taken on

No abnormality seen.

KK 17862

PHYSICAL EXAMINATION

CLOCK NUMBER 76

OCTOBER 1947

NAME BM

ADDRESS _____

CITY _____

BLOOD TEST: NEGATIVE _____ POSITIVE ☒

EYES: ☒ 20-30

EARS: ☒

NOSE: ☒

THROAT: ☒

HEART: ☒

BLOOD PRESSURE: 158/100

URINE ANALYSIS: ☒

X-RAY: ☒

REMARKS: _____

Ad Bauman h
Physician's Signature

KK 2463

Name

Plant: Millington, N.J.

No. 36446

Reading Date 10-1-66

Interpretation of single roentgenogram of chest

taken on 9-4-66

The bronchovascular markings are unusually prominent and there are frequent nodular densities in both lungs, especially on the right. The lung roots are larger than normal. Diaphragmatic adhesions are present on both sides. These changes have developed gradually over the years from "normal" in 1961 - there has been definite further changes since the last film. The appearance of this film suggests a mixed exposure to asbestos and to silica. An occupational history is needed to make a diagnosis more certain, but silicosis and asbestosis must be strongly considered.

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland, Ohio 44104

Name

Plant: Millington, New Jersey

No. 36446

Reading Date 7-27-66

Interpretation of single roentgenogram of chest

taken on 6-29-66

A comparison of this film to that of 1964 shows no further change. Previous comments still apply.

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland, Ohio 44104

KK 12561

No. 27613

Reading Date 6/16/64

Interpretation of single

roentgenogram of chest

taken on 5/12/64

A comparison of films 1953 to date shows development of pleural densities sometime between 1957 and 1960, mostly on right. More ~~xxx~~ recent there have been minor pleural changes on the left. If he has an asbestos exposure it is imperative that a diagnosis of asbestosis be considered

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

Name

Plant:

Millington, N.J.

No. 53

Reading Date: 8/29/62

Interpretation of single

roentgenogram of chest

taken on 8/1/62

The single film shows no change from previous ones of 4/14/60 and a stereo pair of 5/10/60. There is evidence of a right side pleural reaction with some intraparenchymal change suggesting the residue of a previous pneumonia. Film of 9/24/59 did not show these changes. Is there a history of "pleurisy" or pneumonia between 1957 and 1960?

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

Name:

Plant: Millington, N.J. (NUG)

No. 28-57-B

Reading Date: 10/14/57

Interpretation of Single

roentgenogram of chest

taken on 9/28/57 compared with

taken on

No significant abnormality seen.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

NGC

Name |

Plant: Millington, New Jersey

No. 82-60

Reading Date: 5/2/60

Interpretation of single

roentgenogram of chest

taken on 4/14/60 compared with

taken on

A review of films taken in 1953, 1955, 1957, and the current one shows the gradual development of what appears to be pleural adhesions at the right base. It is impossible to know whether or not there is any abnormality within the lung by looking at this single film. A stereo film and information re his medical history of the past 3 or 4 years would be of help in evaluating this film.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

72 P

KK123,66

NATIONAL GYPSUM COMPANY

PLANT, OFFICE, SALES DISTRICT

PHYSICAL EXAMINATION RECORD

DATE 10-5-67

[] PRE-EMPLOYMENT [] PRE-STATEMENT [] PERIODIC HEALTH

ADDRESS _____

AGE OF BIRTH 10/27/00 (AGE 66)[] SINGLE ☒ MARRIED OTHER ☒

LAST EMPLOYMENT _____

HT <u>6"</u>	DISFIGUREMENT - FACE, HEAD OR NECK <u>Strabismus left eye.</u> <u>neg.</u>	VISION - DISTANT C.R.E. <u>20/30</u> P.C.E. <u>20/26</u>	VISION - NEAR 20' 20'	WASSERMAN <u>To lab.</u>
WT <u>13</u>		HEENT <u>neg.</u>		URINALYSIS <u>neg.</u>
CVT <u>N.S.R. - no murmurs well developed.</u>	CHEST <u>il. symmetrical</u> <u>clear</u>	RESPIRATORY <u>148/90</u>	INDUSTRIAL HISTORY <u>neg.</u>	SUGAR <u>neg.</u>
OPERATION CHEST EXPANSION		ABDOMEN <u>neg.</u>		
BLOOD PRESSURE		TUBERCULOSIS <u>neg.</u>		
SKIN AND EXTREMITIES - EDEMA, AMPUTATIONS, FUNCTIONAL DEFECTS, DEFORMITIES		OPERATIVE SCARS <u>neg.</u>		

neg.

CLINICAL FINDINGS - NEUROLOGICAL

neg.

DESCRIPTION

neg.

SUMMARY OF PERMANENT DEFECTS, IMPAIRMENTS: EXAMINEE HAS BEEN ADVISED OF SIGNIFICANT FINDINGS

☒ YES
☐ NOHypertension

PERSONAL STABILITY <u>Good</u>	INTERFERENCE <u>Good</u>
EXAMINER'S SIGNATURE <u>J. P. [Signature]</u>	PHYSICIAN'S SIGNATURE <u>J. P. [Signature]</u>
ASSIGNMENT	PREVIOUS MEDICAL
PHYSICIAN'S APPROVALS CONSENT SUGGESTION COUNSEL	DATE PHYSICIAN EXAMINED FINDINGS
X-RAY REPORT - RADIOGRAPHIC FINDINGS	

KK 123,67

NATIONAL GYPSUM COMPANY

PLANT, OFFICE, SALES DISTRICT

PHYSICAL EXAMINATION RECORD

DATE

10-5-67

☐ PRE-EMPLOYMENT☐ REINSTATEMENT☒ PERIODIC HEALTH

NAME

ADDRESS

DATE OF BIRTH 10/27/00 (AGE 66)

☐ SINGLE ☒ MARRIED OTHER

LAST EMPLOYMENT

HEIGHT 5'6"	DISFIGUREMENT - FACE, HEAD OR NECK Strabismus left eye. Neg.	VISION-DISTANT C.R.E. 20/30 U.L.E. 20/26	VISION-NEAR 20/ 20/	WASSERMAN To test.	Hb.
WEIGHT 163				URINALYSIS Neg.	ALBUMIN
HEART N.S.R. - no murmur	CHEST Well developed.	HERNIA Neg.	ABDOMEN H. ch.	L.M.P.	
CONFIGURATION Bel. symmetrical	CHEST EXPANSION 148/90	INGUINAL RINGS R ✓ L ✓	OPERATIVE SCARS neg.	NORMAL ENLARGED RELAXED	
LUNGS Clear.					

BACK AND EXTREMITIES - EDEMA, AMPUTATIONS, FUNCTIONAL DEFECTS, DEFORMITIES

neg.

SPECIFIC FINDINGS - NEUROLOGICAL

neg.

SKIN ERUPTION

neg.

SUMMARY OF PERMANENT DEFECTS, IMPAIRMENTS: EXAMINEE HAS BEEN ADVISED OF SIGNIFICANT FINDINGS

☒ YES
☐ NO

Hypertension.

EMOTIONAL STABILITY

Good

INTELLIGENCE

Good.

APPLICANT'S SIGNATURE

Accept
Condit.
Accept

Reject

PHYSICIAN'S SIGNATURE

J. H. Edwards

JOB ASSIGNMENT

PREVIOUS MEDICAL

COMPANY APPROVALS

DATE

PART EXAMINED

FILM NO.

PERSONNEL
MANAGER
BUFFALO

X-RAY REPORT - RADIOGRAPHIC FINDINGS

DIST.
RES.
MANAGERPLANT
MANAGER

KK-2568

SAFETY

68

PHYSICAL EXAMINATION RECORD

DATE 9/23/65

☐ PRE-EMPLOYMENT ☐ REINSTATEMENT ☒ PERIODIC HEALTH

ME

ADDRESS

DATE OF BIRTH 10/27/00 (AGE 65)

☐ SINGLE ☒ MARRIED OTHER

LAST EMPLOYMENT National Gypsum Company

EIGHT 16 EIGHT 170	DISFIGUREMENT - FACE, HEAD OR NECK <i>Neg</i>	VISION-DISTANT C.R.E. 20/26 U.L.E. 20/30	VISION-NEAR 20/ 20/	WASSERMAN <i>To lab.</i> URINALYSIS SUGAR <i>Neg</i> ALBUMIN <i>Neg</i> ABDOMEN L.M.P.	Hbt
HEART <i>No murmurs.</i>	CHEST <i>Well developed</i>	HERNIA <i>Neg</i>	ABDOMEN <i>well developed</i>	NORMAL ENLARGED RELAXED	
CONFIGURATION CHEST EXPANSION <i>Equal bilaterally.</i>	BLOOD PRESSURE <i>194/110</i>	INGUINAL RINGS R <i>Neg</i> L <i>Neg</i>	OPERATIVE SCARS <i>None</i>		
UNITS <i>clear</i>					
BACK AND EXTREMITIES - EDEMA, AMPUTATIONS, FUNCTIONAL DEFECTS, DEFORMITIES					

no gross defects.

SPECIFIC FINDINGS - NEUROLOGICAL

key

SKIN ERUPTION

neg

SUMMARY OF PERMANENT DEFECTS, IMPAIRMENTS; EXAMINEE HAS BEEN ADVISED OF SIGNIFICANT FINDINGS

Medial deviation of left eye - rare

NO

EMOTIONAL STABILITY		Good		INTELLIGENCE		Good	
APPLICANT'S SIGNATURE				Accept	Condit. Accept	Reject	PHYSICIAN'S SIGNATURE
							L.M. Akman
JOB ASSIGNMENT				PREVIOUS MEDICAL			
COMPANY APPROVALS		DATE		PART EXAMINED		FILM NO.	
PERSONNEL MANAGER BUFFALO		X-RAY REPORT - RADIOGRAPHIC FINDINGS Has hypertension. Recommend he see his physician for treatment. KK 2369					
DIRECT RES MANAGER							
PLANT MANAGER							
SAFETY							

NATIONAL GYPSUM COMPANY

Sales District _____

Office _____

Plant Willington, N.J.

Date _____

Dept. _____

Check No. 76

Age 62

Color _____

S M W D*

Children _____

PHYSICAL RECORD (TO BE COMPLETED BY PLANT OR OFFICE)

Arthritis _____

Epilepsy _____

Hernia _____

Operations _____

List on reverse side any hospital admissions in past 5 years.

Venereal Diseases _____

Tuberculosis _____

Liquor _____

Tobacco _____

Drugs _____

Other Illnesses _____

Injuries - description, location, % disability _____

Compensation Received _____

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity?

Last previous employment _____

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history)

Signature of Applicant _____

Witness _____

divorced, give date and place _____

PHYSICAL EXAMINATION (TO BE COMPLETED BY DOCTOR)

Height 5'6"

Weight 164

Over Weight _____
Normal Weight _____
Under Weight _____

Eyes: Right 20/20

Left 20/20

Corrected: Right _____

Left _____

Binocular Vision _____

Pupils ✓

Cornea ✓

Lungs ✓

Shortness of Breath none

Chest X-Ray _____

Heart ✓

Blood Pressure 154/82

Pulse 74

Ears ✓

Nose ✓

Teeth ✓

Throat and Tonsils ✓

Hearing: Right 20/20

Left 20/20

Abdomen ✓

Hernia ✓

Spine ✓

Hemorrhoids ✓

Extremities ✓

Scars ✓

(Note % of defect if any exist)

Musculature ✓

Skin ✓

Glands _____

(Head and neck only - give location)

Genitals ✓

Reflexes ✓

Mentality ✓

Blood Test ✓

Urinalysis ✓

General Condition: Good ✓ Fair _____ Poor _____

Nutrition: Good ✓ Fair _____ Poor _____

Do you recommend applicant for work? ✓

Type of Work? _____

KK 12870

Remarks _____

APPROVED _____

FOREMAN _____

SAFETY SUPERVISOR _____

Date 6/12/23

Examined by Ad. Baerman

THIS MAN'S PHYSICAL CONDITION IS KNOWN BY HIS SUPERVISOR YES ☒ NO ☐

68
NATIONAL GYPSUM COMPANY

Sales District

Office

Plant Millington, N.J.

ne _____ Address _____
Date 4/8/61 Dept. _____ Check No. 76
Age 60 Color C S M W D* Children

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis _____ Hernia _____
Epilepsy _____
Operations _____ List on reverse side any hospital admissions in past 5 years.
Venereal Diseases _____ Tuberculosis _____
Liquor _____ Tobacco _____ Drugs _____
Other Illnesses _____
Injuries - description, location, % disability _____
Compensation Received _____ Do you have a workmen's compensation case pending for either injury or illness?
Have you a history of silicosis or any other dust disease? _____ Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity?

Last previous employment

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history)

Signature of Applicant

Witness

divorced, give date and place

PHYSICAL EXAMINATION
(TO BE COMPLETED BY DOCTOR)

Height 5'6" Weight 175 Over Weight _____ Normal Weight _____ Under Weight _____
Eyes: Right 20/20 Left 20/50 Corrected: Right _____ Left _____ Binocular Vision _____
Pupils ✓ Cornea ✓
Lungs ✓ Shortness of Breath L Chest X-Ray _____
Heart ✓ Blood Pressure 134/92 Pulse 72
Ears ✓ Nose ✓ Teeth ✓
Throat and Tonsils ✓ Hearing: Right 20/20 Left 20/20
Abdomen ✓ Hernia ✓
Spine ✓ Hemorrhoids o
Extremities ✓
Scars ✓ (Note % of defect if any exist) Musculature ✓
Skin ✓ Glands (Head and neck only - give location) Genitals ✓
Reflexes ✓ Mentality L
Blood Test ✓ Urinalysis L
General Condition: Good ✓ Fair _____ Poor _____ Nutrition: Good L Fair _____ Poor _____
Do you recommend applicant for work? A Type of Work? L

Remarks

APPROVED

FOREMAN

SAFETY SUPERVISOR

Examined by

Date 4-19-61

KK 2571

Dr. Bauman

NATIONAL GYPSUM COMPANY

Sales District 52

Office _____

Plant MJ

Name _____

Address _____

ite April 27, 1959

Dept. _____

Check No. _____

Age 68

Color M

S M W D

Children _____

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis _____

Epilepsy _____

Hernia _____

Operations _____

List on reverse side any hospital admissions in past 5 years.

Veneral Diseases _____

Tuberculosis _____

Liquor _____

Tobacco _____

Drugs _____

Other Illnesses _____

Injuries - description, location, % disability _____

Compensation Received _____

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or insanity?

Last previous employment _____

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history)

Signature of Applicant _____

Witness _____

* If divorced, give date and place _____

PHYSICAL EXAMINATION (TO BE COMPLETED BY DOCTOR)

Height 5'6"

Weight 178

Over Weight _____
Normal Weight ☒
Under Weight _____

Eyes: Right 34

Left 34

Corrected: Right _____

Left _____

Binoocular Vision _____

Pupils _____

Cornea ☒

Lungs _____

Shortness of Breath _____

Chest X-Ray _____

Heart _____

Blood Pressure 104/84

Pulse 76

Ears _____

Nose ☒

Teeth ☒

Throat and Tonsils ☒

Hearing: Right 20/20

Left 20/20

Abdomen ☒

Hernia ☒

Spine ☒

Hemorrhoids ☒

Extremities ☒

Scars ☒

(Note % of defect if any exist)

Musculature ☒

Skin ☒

Glands _____

(Head and neck only - give location)

Genitals ☒

Reflexes ☒

Mentality ☒

Blood Test ☒

Urinalysis ☒

General Condition: Good ☒

Fair _____

Poor _____

Nutrition: Good ☒

Fair _____

Poor _____

Do you recommend applicant for work? Y

Type of Work? _____

Remarks _____

APPROVED _____

FOREMAN _____

SAFETY SUPERVISOR _____

PLANT MANAGER _____

Date 4-17-59

Examined by [Signature]

THIS EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ☒ NO ☐

CLOCK NUMBER

76

DATE

11-21-82

NAME

ADDRESS

CITY & STATE

BLOOD TEST

EYES

EARS

NOSE

THROAT

HEART

BACK

BLOOD PRESSURE

136/84

HERNIA

URINE ANALYSIS

X-RAY

PREVIOUS INJURIES

REMARKS

KK 12873

PHYSICAL EXAMINATION

CHECK NUMBER

76

DATE

June 8, 1951

NAME

ADDRESS

CITY

BLOOD TEST

EYES

EARS

NOSE

THROAT:

HEART

BLOOD PRESSURE

121/74

URINE ANALYSIS

X-RAY

REMARKS

Physician's Signature

KK 12874

PHYSICAL EXAMINATION

BOOK NUMBER

76

DATE _____

June 8, 1951

NAME

ADDRESS

CITY

BLOOD TEST

EYES

EARS

MOSE

THROAT:

HEART

BLOOD PRESSURE

URINE ANALYSIS

X-RAY

REMARKS

Physician's Signature

KK. 225-5

PHYSICAL EXAMINATION

CLOCK NUMBER

76

DATE

11-21-52

NAME

ADDRESS

CITY & STATE

BLOOD TEST

EYES

L 20-30

R 20-30

EARS

NOSE

THROAT

HEART

BACK

BLOOD PRESSURE

134/84

HERNIA

URINE ANALYSIS

X-RAY

PREVIOUS INJURIES

REMARKS

PHYSICIAN'S SIGNATURE

NATIONAL GYPSUM COMPANY

Sales District 2

Office _____

Plant M11

Name _____

Address _____

Date April 17, 1959

Dept. _____

Check No. _____

58Color W

S M W D*

Children _____

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis _____

Epilepsy _____

Hernia _____

Operations _____

List all surgeries and any hospital admissions in past 5 years.

Venereal Diseases _____

Tuberculosis _____

Liquor _____

Tobacco _____

Drugs _____

Other Illnesses _____

Injuries - description, location, % disability _____

Compensation Received _____

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease? _____

Have you ever been in military service? _____

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity? _____

Last previous employment _____

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history) _____

Signature of Applicant _____

Witness _____

• If divorced, give date and place _____

PHYSICAL EXAMINATION
(TO BE COMPLETED BY DOCTOR)Over Weight _____
Normal Weight _____
Under Weight _____

Height _____

Weight _____

Eyes: Right _____

Left _____

Corrected: Right _____

Left _____

Binocular Vision _____

Pupils _____

Cornea _____

Lungs _____

Shortness of Breath _____

Chest X-Ray _____

Heart _____

Blood Pressure _____

Pulse _____

Ears _____

None _____

Teeth _____

Throat and Tonsils _____

Hearing: Right _____

Left _____

Abdomen _____

Hernia _____

Spine _____

Hemorrhoids _____

Extremities _____

Scars _____

(Note % of defects if any exist)

Musculature _____

Skin _____

Glands _____

(Head and neck only - give location)

Genitals _____

Reflexes _____

Mentality _____

Blood Test _____

Urinalysis _____

General Condition: Good _____

Fair _____

Poor _____

Nutrition: Good _____

Fair _____

Poor _____

Do you recommend applicant for work? 11Type of Work? KK 12577I do

PROVED

FOREMAN

SAFETY

SUPERVISOR

PLANT

MANAGER

Examined by Al BaumanDate 4-17-59THIS EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ☒ NO ☐

M.D.

NATIONAL GYPSUM COMPANY

Sales District

Office

Plant Millington, R.J.

Name

Address

Date 4/8/61

Dept.

Check No. 76

60

Color

C

S M W D*

Children

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis

Epilepsy

Hernia

Operations

List on reverse side any hospital admissions in past 5 years.

Venereal Diseases

Tuberculosis

Liquor

Tobacco

Drugs

Other Illnesses

Injuries - description, location, % disability

Compensation Received

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity?

Last previous employment

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history)

Signature of Applicant

Witness

• If divorced, give date and place

PHYSICAL EXAMINATION
(TO BE COMPLETED BY DOCTOR)Over Weight
Normal Weight
Under WeightBinocular
Visionght 5'6" Weight 175
Eyes: Right 20/20 Left 20/50 Corrected: Right

Pupils ✓ Cornea ✓

Lungs ✓ Shortness of Breath L

Heart ✓ Blood Pressure 154/92

Ears ✓ None ✓

Throat and Tonsils L Hearing: Right 20/20

Abdomen ✓ Hernia ✓

Spine ✓ Hemorrhoids ✓

Extremities ✓

Scars ✓ (Note % of defects if any exist)

Skin ✓ Glands (Head and neck only - give location)

Reflexes ✓ Mentality ✓

Blood Test ✓ Urinalysis L

General Condition: Good ✓ Fair Poor Nutrition: Good L Fair Poor

Do you recommend applicant for work? ✓ Type of Work? L

" aka

KK 12878

... PROVED

FOREMAN

SAFETY
SUPERVISOR
PLANT

Examined by

Date 4-19-61
AKB

M.D.

NATIONAL GYPSUM COMPANY

Sales District

Office

Plant Millington, N.J.

Check No. 76

Children

Name

Address

Dept.

Age 62 Color

S M W D

PHYSICAL RECORD

(TO BE COMPLETED BY PLANT OR OFFICE)

Arthritis

Epilepsy

Hernia

Operations

List on reverse side any hospital admissions in past 5 years.

Veneral Diseases

Tuberculosis

Liquor

Tobacco

Drugs

Other Illnesses

Injuries - description, location, & disability

Compensation Received

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity?

Last previous employment

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history)

Signature of Applicant

Witness

* If divorced, give date and place

PHYSICAL EXAMINATION

(TO BE COMPLETED BY DOCTOR)

Over Weight

Normal Weight

Under Weight

Height 5'6"

Weight 164

Eyes: Right 20/20

Left 25/30

Corrected: Right

Pupils

Cones

Lungs

Shortness of Breath

Heart

Blood Pressure 134/82

Ears

None

Throat and Tonsils

Hearing: Right 20/20

Abdomen

Hernia

Spine

Hemorrhoids

Extremities

Scars

(Note % of defects if any exist)

Skin

Glands

(Head and neck only - give location)

Reflexes

Mentality

Blood Test

Urinalysis

General Condition: Good

Fair

Poor

Nutrition: Good

Fair

Poor

Do you recommend applicant for work?

Type of Work?

Remarks

APPROVED

FOREMAN

SAFETY

SUPERVISOR

DATE

Examined by

Ad Bauman

Date

6/12/43

M.I.

PLANT, OFFICE, SALES DISTRIBUTION: non-licor

DATE 9/23/65

PRE-EMPLOYMENT : REINSTATEMENT ☒ PERIODIC REVIEW

ALBANY

1.01 BIRTH 10/27/00 (A.O. 65)

NO. 1. ~~2~~ 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032 1033 1034 1035 1036 1037 1038 1039 1040 1041 1

EMPLOYMENT National Gypsum Company

[illegible]

no gross defects.

CONCLUSIONS - NEUROLOGICAL

Wyz

INTERPRETATION

neg

Summary of Permanent Defects, Impairments: Examinee has been advised of significant findings. [160]
medial deviation of left eye base

ORIGINAL STABILITY		INTELLIGENCE	
Good		Good	
REMARKS SIGNATURE		REMARKS SIGNATURE	
[Signature]		[Signature]	
ASSIGNMENT		ASSIGNMENT	
[Blank]		[Blank]	

MANY APPROVALS DATE TIME NAME ADDRESS CITY STATE ZIP	PART EXAMINED XRAY REPORT - RADIOGRAPHIC FINDINGS Has hypertension. Recommend he see his physician for treatment.	FINDING KK 12880
---	---	---------------------

IONAL GYPSUM COMPANY
SICAL EXAMINATION RECORD

DATE 10-5-67

☐ PRE-EMPLOYMENT ☐ REINSTATEMENT ☒ PERIODIC HEALTH

ADDRESS _____

DATE OF BIRTH 10/27/00 (AGE 66)

☐ SINGLE ☒ MARRIED OTHER ✓

EMPLOYMENT _____

HT <u>6"</u>	DISFIGUREMENT - FACE, HEAD OR NECK <u>Strabismus left eye.</u>	VISION - DISTANT C.I.E. <u>20/30</u>	VISION - NEAR C.I.E. <u>20/26</u>	WASSERMAN <u>To lat.</u>
HT <u>3</u>	<u>neg.</u>			URINALYSIS <u>neg.</u>
RT <u>N.S.R. - no murmurs well developed.</u>	CHEST <u>il. symmetrical</u>	PERNIA <u>neg.</u>	ABDOMEN <u>il. abn.</u>	SUGAR <u>neg.</u>
FIGURATION CHEST EXPANSION <u>il. symmetrical</u>	BLOOD PRESSURE <u>148/90</u>	INGUINAL RINGS <u>✓</u>	STOMACH <u>relaxed</u>	
GS <u>clear.</u>		OPERATIVE SCARS <u>neg.</u>		

UK AND EXTREMITIES - EDEMA, AMPUTATIONS, FUNCTIONAL DEFECTS, DEFORMITIES

neg.

NEUROLOGIC M.

neg.

SKIN ERUPTION

neg.

CAREY OF PERMANENT DEFECTS, IMPAIRMENTS: EXAMINEE HAS BEEN ADVISED OF SIGNIFICANT FINDINGS

☒ YES
☐ NO

Hypertension.

MOTIONAL STABILITY

Good.

INTELLIGENCE

Good.

APPLICANT'S SIGNATURE

Accept ☒ Conditional ☐ Reject ☐

PHYSICIAN'S SIGNATURE

J. H. Edwards

JOB ASSIGNMENT

PREVIOUS MEDICAL

COMPANY APPROVALS

DATE

PART EXAMINED

FILM NO.

PERSONNEL
MANAGER
BUFFALO

X-RAY REPORT - RADIOGRAPHIC FINDINGS

DISTRICT
SAL
MA

PLANT
MANAGER

SALES
REPRESENTATIVE

KK 12851

M.D.

NO. 900 H-1-67

NATIONAL GYPSUM COMPANY

PLANT, OFFICE, JES DISTRICT ¹²² ^{10/23/65} ^{10/23/65}

PHYSICAL EXAMINATION RECORD

DATE 9/23/65[] PRE-EMPLOYMENT [] REINSTATEMENT ☒ PERIODIC HEALTH

ADDRESS _____

AGE OF BIRTH 10/27/00 (AGE 65)[] SINGLE ☒ MARRIED OTHER _____EMPLOYMENT National Gypsum Company

HT <u>6"</u>	DISFIGUREMENT - FACE, HEAD OR NECK <u>neg</u>	VISION - DISTANT C.R.E. 20/26 U.L.E. 20/30	VISION - NEAR 20/ 20/	WASSERMAN <u>20 lat.</u>
WT <u>70</u>				URINACYSIS NEG
RT <u>no murmurs</u>	CHEST <u>well developed</u>	HEENT <u>neg</u>		SUGAR <u>neg</u> ALBUMIN <u>neg</u>
FIGURATION	CHEST EXPANSION <u>good bilaterally</u>	BLOOD PRESSURE <u>194/110</u>	INGUINAL RINGS <u>neg</u>	ABDOMEN <u>well developed</u>
<u>clear</u>		OPERATIVE SCARS <u>none</u>		NOBMA <u>NEG</u>
L.A. AND EXTREMITIES - EDEMA, AMPUTATIONS, FUNCTIONAL DEFECTS, DEFORMITIES				

no gross defects

SPECIFIC FINDINGS - NEUROLOGICAL

neg

DERMATOLOGY

neg

SUMMARY OF PERMANENT DEFECTS, IMPAIRMENTS: EXAMINEE HAS BEEN ADVISED OF SIGNIFICANT FINDINGS

Medial deviation of left eye☒ YES
☐ NO

MOTIONAL STABILITY

Good

INTELLIGENCE

Good

EMPLOYEE'S SIGNATURE

Accept ☐ Conditional ☐ Reject ☐

PHYSICIAN'S SIGNATURE

L.M. Akman

JOB ASSIGNMENT

PREVIOUS MEDICAL

COMPANY APPROVALS

DATE

PART EXAMINED

FILM NO.

PERSONNEL
MANAGER
REFUSEDDIST
SAL
MANT
MESSAGESAFETY
SUPER.

X-RAY REPORT - RADIOGRAPHIC FINDINGS

Has hypertension. Recommend
he see his physician for
treatment.KK-2552

M.D.

NATIONAL GYPSUM COMPANY

DNP

Sales District _____

Office _____

Plant Willington, N.J.

Name: _____

Address _____

Dept. _____

Check No. 76

Age 62

Color _____

S M W D*

Children _____

PHYSICAL RECORD (TO BE COMPLETED BY PLANT OR OFFICE)

Arthritis _____

Epilepsy _____

Hernia _____

Operations _____

List on reverse side any hospital admissions in past 5 years.

Venereal Diseases _____

Tuberculosis _____

Liquor _____

Tobacco _____

Drugs _____

Other Illnesses _____

Injuries - description, location, % disability _____

Compensation Received _____

Do you have a workmen's compensation case pending for either injury or illness?

Have you a history of silicosis or any other dust disease?

Have you ever been in military service?

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or insanity?

Last previous employment _____

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history) _____

Signature of Applicant _____

Witness _____

* If divorced, give date and place _____

PHYSICAL EXAMINATION (TO BE COMPLETED BY DOCTOR)

Height 5'6"

Weight 164

Over Weight _____
Normal Weight _____
Under Weight _____

Eyes: Right 20/20

Left 20/20

Corrected: Right _____

Left _____

Binocular Vision _____

Pupils ✓

Cornea ✓

Lungs ✓

Shortness of Breath None

Chest X-Ray _____

Heart ✓

Blood Pressure 154/82

Pulse 74

Ears ✓

None ✓

Teeth ✓

Throat and Tonsils ✓

Hearing: Right 20/20

Left 20/20

Abdomen ✓

Hernia ✓

Spine ✓

Hemorrhoids ✓

Extremities ✓

Scars ✓

(Note % of defects if any exist)

Musculature ✓

Skin ✓

Glands (Head and neck only - give location) _____

Genital ✓

Reflexes ✓

Mentality ✓

Blood Test ✓

Urinalysis ✓

General Condition: Good ✓

Fair _____

Poor _____

Nutrition: Good ✓

Fair _____

Poor _____

Do you recommend applicant for work? A

Type of Work? KK 2453

Remarks _____

APPROVED _____

FOREMAN _____

SAFETY SUPERVISOR _____

PLANT _____

Date 6/12/63

Examined by Ad. Bauman

THIS EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ✓ NO ✓

68
NATIONAL GYPSUM COMPANY

Sales District UNIT
Office _____
Plant Millington, N.J.

Name _____ Address _____

Age 60 4/8/61 Dept. _____ Check No. 76
Color C S M W D* _____ Children _____

PHYSICAL RECORD
(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis _____ Epilepsy _____ Hernia _____
Operations _____ List on reverse side any hospital admissions in past 5 years.
Venereal Diseases _____ Tuberculosis _____
Liquor _____ Tobacco _____ Drugs _____
Other Illnesses _____
Injuries - description, location, % disability _____
Compensation Received _____ Do you have a workmen's compensation case pending for either injury or illness? _____
Have you a history of silicosis or any other dust disease? _____ Have you ever been in military service? _____

Have any of your parents or brothers or sisters had Tuberculosis, Cancer, Diabetes, Epilepsy or Insanity? _____

Last previous employment _____

I certify that the above answers are true, correctly recorded, and that I am in good health, and that I have never suffered from Silicosis, except (history) _____

Signature of Applicant _____

Witness _____

* If divorced, give date and place _____

PHYSICAL EXAMINATION
(TO BE COMPLETED BY DOCTOR)

Height 5'6" Weight 175 Over Weight _____ Normal Weight _____ Under Weight _____
Eyes: Right 20/20 Left 20/50 Corrected: Right _____ Left _____ Binocular Vision _____
Pupils ✓ Cornea ✓
Lungs ✓ Shortness of Breath L Chest X-Ray _____
Heart ✓ Blood Pressure 154/92 Pulse 72
Ears ✓ Nose ✓ Teeth ✓
Throat and Tonsils ✓ Hearing: Right 20/20 Left 20/20
Abdomen ✓ Hernia ✓
Spine ✓ Hemorrhoids ✓
Extremities ✓
Scars ✓ (Note % of defects if any exist) Musculature ✓
Skin ✓ Glands (Head and neck only - give location) _____ Genitals ✓
Reflexes ✓ Mentality ✓
Blood Test ✓ Urinalysis ✓
General Condition: Good ✓ Fair _____ Poor _____ Nutrition: Good ✓ Fair _____ Poor _____

Do you recommend applicant for work? ✓

Type of Work? ✓

Remarks _____

KK 4/19/61

APPROVED _____

FOREMAN _____

SAFETY SUPERVISOR _____

PLANT _____

Examined by AK Bauman

Date 4-19-61

THIS EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ☐ NO ☐

NATIONAL GYPSUM COMPANY

Sales District 4-5

Office _____

Plant M1

Address _____

17, 1959

Dept. _____

Clock No. _____

Color W

S M W D

Children _____

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Epilepsy _____

Hernia _____

List on reverse side any hospital admissions in past 5 years.

scars _____

Tuberculosis _____

Tobacco _____

Drugs _____

scars _____

description, location, % disability

ation Received _____

Do you have a workmen's compensation case pending for either injury or illness?

history of silicosis or other disease?

Have you ever been in military service?

of your parents or brothers or sisters had
mia, Cancer, Diabetes, Epilepsy or Insanity?

vious employment _____

that the above answers are true, correctly recorded, and that I am in
alth, and that I have never suffered from Silicosis, except (history)

are / applicant _____

Witness _____

give date and place _____

PHYSICAL EXAMINATION (TO BE COMPLETED BY DOCTOR)

Over Weight
Normal Weight
Under Weight

st _____

Weight _____

Right _____

Left _____

Corrected: Right _____

Left _____

Binoocular Vision

ils _____

Cornea _____

igs _____

Shortness of Breath _____

Chest X-Ray _____

art _____

Blood Pressure _____

Pulse _____

rs _____

Nose _____

Teeth _____

throat and Tonsils _____

Hearing: Right _____

Left _____

bdomen _____

Hernia _____

pine _____

Hemorrhoids _____

Extremities _____

Scars _____

(Note % of defects if any exist)

Musculature _____

Skin _____

Glands _____

(Head and neck only - give location)

Genitals _____

Reflexes _____

Mentality _____

Blood Test _____

Urinalysis _____

eral Condition: Good _____

Fair _____

Poor _____

Nutrition: Good _____

Fair _____

Poor _____

do you recommend applicant for work? 11

Type of Work? _____

Remarks _____

APPROVED _____

FOREMAN _____

Date 4-17-59

Examined by A. K. Bannan

M.I.

EMPLOYEE'S CONDITION IS KNOWN BY HIS SUPERVISOR. YES ☒ NO ☐

KK-2685

Name

Plant Millington, N.J.

No. 36446

Reading Date 10-1-68

Interpretation of single

roentgenogram of chest

taken on 9-4-68

The bronchovascular markings are unusually prominent and there are irregular, nodular densities in both lungs, especially on the right. The lung roots are larger than normal. Diaphragmatic adhesions are present on both sides. These changes have developed gradually over the years from "normal" in 1953 - there has been definite further changes since the last film. The appearance of this film suggests a mixed exposure to asbestos and to silica. An occupational history is needed to make a diagnosis more certain, but silicosis and asbestosis must be strongly considered.

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland, Ohio 44104

KK 22556

Name

Plant: Millington, New Jersey

No. 36446

Reading Date 7-27-66

Interpretation of single

roentgenogram of chest

taken on 6-29-66

A comparison of this film to that
of 1964 shows no further change. Previous
comments still apply.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland, Ohio 44104

KK-1257

Name

Plant

Millington, N.J.

No.

27613

Reading Date

6/16/64

Interpretation of

single

roentgenogram of chest

taken on

5/12/64

A comparison of films 1953 to date shows development of pleural densities sometime between 1957 and 1960, mostly on right. More ~~xxx~~ recent there have been minor pleural changes on the left. If he has an asbestos exposure it is imperative that a diagnosis of asbestosis be considered

GEORGE W. WRIGHT, M. D.

Saint Luke's Hospital

11311 Shaker Boulevard

Cleveland 4, Ohio

KK 12355

Name

Plant:

Millington, N.J.

No.

53

Reading Date: 8/29/62

Interpretation of

single

roentgenogram of chest

taken on

8/3/62

The single film shows no change from previous ones of 4/14/60 and a stereo pair of 5/10/60. There is evidence of a right side pleural reaction with some intraparenchymal change suggesting the residue of a previous pneumonia. Film of 9/24/59 did not show these changes. Is there a history of "pleurisy" or pneumonia between 1957 and 1960?

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 12850

NGC
Name 68 Plant: Millington, New Jersey
No. 83-60 Reading Date: 5/2/60
Interpretation of single roentgenogram of chest
taken on 4/14/60 compared with taken on

A review of films taken in 1953, 1955, 1957, and the current one shows the gradual development of what appears to be pleural adhesions at the right base. It is impossible to know whether or not there is any abnormality within the lung by looking at this single film. A stereo film and information re his medical history of the past 3 or 4 years would be of help in evaluating this films.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 12500

68
Name:

Plant: Millington, N.J. (MCC)

No. 28-57-B

Reading Date: 10/4/57

Interpretation of Single

roentgenogram of chest

taken on 9/28/57 compared with

taken on

No significant abnormality seen.

GEORGE W. WRIGHT, M. D.
Saint Luke's Hospital
11311 Shaker Boulevard
Cleveland 4, Ohio

KK 12001