

Name

No. 36446

Interpretation of single

taken on 9-4-68

Plant Millington, N.J.

Reading Date 10-1-68

roentgenogram of chest

Retired

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.

film in storage phot. proc.

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

Millington, N.J.

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: 10/1/57

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 Spec. Store

PHYSICAL EXAMINATION RECORD

DATE 10-5-67

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

ADDRESS _____

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

[] SINGLE ☒ MARRIED OTHER ✓

TYPE EMPLOYMENT _____

HT <u>6"</u>	DISFIGUREMENT - FACE, HEAD OR NECK <u>Strabismus left eye.</u>	VISION - DISTANT C.R.E. <u>20/30</u>	VISION - NEAR C.R.E. <u>20/26</u>	WASSERMAN <u>To lab.</u>
WT <u>13</u>	<u>neg.</u>	URIC ACID <u>neg.</u>	GLUCOSE <u>neg.</u>	URIC ACID <u>neg.</u>
CHEST <u>N.S.R. - no murmurs well developed.</u>	RESPIRATION CHEST EXPANSION <u>il. symmetrical</u>	BLOOD PRESSURE <u>148/90</u>	ECG <u>clear</u>	ABDOMEN <u>neg.</u>
SKIN AND EXTREMITIES - EDEMA, AMPUTATIONS, FUNCTIONAL DEFECTS, DEFORMITIES <u>neg.</u>		OPERATIVE SCARS <u>neg.</u>		

CLINICAL FINDINGS - NEUROLOGICAL

neg.

DESCRIPTION

neg.

NOTICE OF PERMANENT DEFECTS, IMPAIRMENTS: EXAMINEE HAS BEEN ADVISED OF SIGNIFICANT FINDINGS ☒ YES ☐ NO

Hypertension

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	DATE	PHYSICIAN EXAMINED	PHYSICIAN
CONSENT			
CHECKED			
INITIALS			

X-RAY REPORT - RADIOGRAPHIC FINDINGS

KK 123.67

NATIONAL GYPSUM COMPANY

PLANT, OFFICE, SALES DISTRICT Millington

PHYSICAL EXAMINATION RECORD

DATE 10-5-67☐ PRE-EMPLOYMENT ☐ REINSTATEMENT ☒ PERIODIC HEALTHNAME [redacted] ADDRESS [redacted]DATE OF BIRTH 10/27/00 (AGE 66)☐ SINGLE ☒ MARRIED OTHER [redacted]LAST EMPLOYMENT [redacted]

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

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
☐ NOHypertension.

EMOTIONAL STABILITY

Good

INTELLIGENCE

Good.

APPLICANT'S SIGNATURE

Accept ☒ Condit. ☐
AcceptReject ☐

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.
LES
NAGERPLANT
MANAGER

KK-2568

SALES
MANAGER

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		INTELLIGENCE	
Good		Good	
APPLICANT'S SIGNATURE	Accept	Condit. Accept	Reject
			PHYSICIAN'S SIGNATURE
			L.M. Shuman
JOB ASSIGNMENT		PREVIOUS MEDICAL	

COMPANY APPROVALS	DATE	PART EXAMINED	FILM NO.
PERSONNEL MANAGER BUFFALO	X-RAY REPORT - RADIOGRAPHIC FINDINGS		
INCH ES MANAGER	Has hypertension. Recommend he see his physician for treatment.		
PLANT MANAGER	KK 12569		
SAFETY			

NATIONAL GYPSUM COMPANY

Sales District

Office

Plant Willington, N.J.

Date

Dept.

Check No. 76Age 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)Over Weight
Normal Weight
Under WeightHeight 5'6"Weight 164Eyes: Right 20/20Left 20/20

Corrected: Right

Left

Binocular Vision

Pupils ☒Cornea ☒Lungs ☒Shortness of Breath none

Chest X-Ray

Heart ☒Blood Pressure 154/82Pulse 74Ears ☒Nose ☒Teeth ☒Throat and Tonsils ☒Hearing: Right 20/20Left 20/20Abdomen ☒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 6/12/63Examined by Ad. BaermanTHIS PHYSICAL EXAMINATION 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 W

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? KK

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

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 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 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 ack

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 19 Color C S M W D* Children _____

PHYSICAL RECORD

(TO BE COMPLETED BY PERSONNEL DEPARTMENT)

Arthritis _____ Hernia _____
Epilepsy _____
Operations _____
Venereal Diseases _____ Tuberculosis _____
Liquor _____ Tobacco _____ Drugs _____
Other Illnesses _____
Injuries - description, location, % disability _____
Compensation Received _____
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)

ght 5'6" Weight 175
Eyes: Right 20/20 Left 20/50 Corrected: Right _____ Left _____
Pupils ✓ Cornea ✓
Lungs ✓ Shortness of Breath L Chest X-Ray _____
Heart ✓ Blood Pressure 154/92 Pulse 72
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) _____
Skin ✓ (Head and neck only - give location) _____
Reflexes ✓ Glands ✓ Mentalities ✓
Blood Test ✓ Urinalysis L
General Condition: Good ✓ Fair _____ Poor _____ Nutrition: Good ✓ Fair _____ Poor _____
Do you recommend applicant for work? ✓ Type of Work? ✓

Over Weight _____
Normal Weight _____
Under Weight _____

Binocular Vision _____

Musculature ✓

Genitals ✓

KK 12878

... PROVED

FOREMAN
SAFETY
SUPERVISOR
PLANT

Examined by _____

AK Brown

Date 4-19-61

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)

Height 5'6"

Weight 164

Eyes: Right 20/20

Left 25/30

Corrected: Right

Pupils

Cones

Lungs

Shortness of Breath

Chest X-Ray

Heart

Blood Pressure 134/82

Pulse 74

Ears

None

Teeth

Throat and Tonsils

Hearing: Right 20/20

Left 20/20

Abdomen

Hernia

Spine

Hemorrhoids

Extremities

(Note % of defects if any exist)

Musculature

Scars

(Head and neck only - give location)

Genital

Skin

Glands

Mentality

Reflexes

Urinary

Blood Test

General Condition: Good

Fair

Poor

Nutrition: Good

Fair

Poor

Recommend applicant for work?

A

Type of Work?

Remarks

APPROVED

FOREMAN

SAFETY SUPERVISOR

DATE

Examined by

Ad Bauman

Date

6/12/43

M.I.

PSYCHICAL EXAMINATION RECORD

PLANT, OFFICE, SALES DISTRIBUTION Non-Hour

DATE 9/23/65

PRE-EMPLOYMENT : REINSTATEMENT X PERIODIC HEALTH

413133

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

~~INCL. ATTACHED TO OTHER~~

EMPLOYMENT National Gypsum Company

[illegible]

no gross defects.

CONCLUSIONS - NEUROLOGICAL

Wey

INTERPRETATION

neg

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

medial deviation of left eye - see

LIM

PERSONAL STABILITY	Good	INTELLIGENCE	Good
PERSONAL SIGNATURE		PERSONAL SIGNATURE	
PERSONALITY		PERSONALITY	

MANY APPROVALS DATE NAME TITLE NAME TITLE NAME TITLE	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> <u>neg.</u>	VISION - DISTANT C.I.E. <u>20/30</u> U.I.E. <u>20/26</u>	VISION - NEAR 20/ 20/	WASSERMAN <u>To lat.</u>
WT <u>3</u>				URINALYSIS <u>neg.</u>
RT <u>N.S.R. - no murmur</u>	CHEST <u>well developed</u>	PERNIA <u>neg.</u>		ABDOMEN <u>normal</u>
FIGURATION	CHEST EXPANSION <u>il. symmetrical</u>	BLOOD PRESSURE <u>148/90</u>	INGUINAL LUNGS <u>✓</u>	STOMACH <u>relaxed</u>
GS <u>clear</u>		OPERATIVE SCARS <u>neg.</u>		

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

neg.

W. FINDINGS - NEUROLOGIC M.

neg.

AIN ERUPTION

neg.

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

☒ YES
☐ NO

Hypertension.

OTIONAL STABILITY

Good

INTELLIGENCE

Good.

APPLICANT'S SIGNATURE

Accept ☒ Conditional ☐ Reject

PHYSICIAN'S SIGNATURE

J. H. Edwards

IGH ASSIGNMENT

PREVIOUS MEDICAL

COMPANY APPROVALS

DATE

PART EXAMINED

FILM NO.

PERSONNEL
MANAGER
BUFFALO

X-RAY REPORT - RADIOGRAPHIC FINDINGS

DISTRICT
SAL
MA

LIST
MANAGER

SUPER
STAFF

KK 12851

M.D.

NO. 900 H-1

41.17

NATIONAL GYPSUM COMPANY

DNP

Sales District _____
Office _____
Plant Millington, 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 ✓ Hemia _____
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 UNT
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 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 _____

you recommend applicant for work? ✓

Type of Work? ✓

Remarks _____

KK 4/19/61

APPROVED _____

FOREMAN _____

SAFETY SUPERVISOR _____

PLANT _____

Examined by _____

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
Cancer, Diabetes, Epilepsy or Insanity? _____

vious employment _____

that the above answers are true, correctly recorded, and that I am in
dth, 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. Bauman

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 2256

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

roentgenogram of chest

single

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