February 9, 1942.

Dr. George N. Berger,
303 Doctors Building,
Covington, Kentucky.

Dear Dr. Berger:

I am sending you herewith a report of our analyses on the blood and urine of your patient, [redacted] These results are definitely indicative of a significant exposure to lead compounds, and they are within the range of values which we have found in association with lead intoxication, although they do not in themselves necessitate the making of that diagnosis.

I should like to confirm my telephone conversation with you by saying that we are not agreed among ourselves that the clinical picture is that of lead intoxication. It does seem probable that the illness is of occupational origin. We believe that this man should be kept under observation periodically to make sure whether or not he has some blood dyscrasia and we think it is wise for him to change his work so as to avoid the conditions which appear to have been responsible for his illness.

I should appreciate it very much indeed, if we might know something of the future progress of this man's condition.

Cordially yours,

Robert A. Aehoe, M. D.

RAK ef

Enc.

C. C. Dr. Willard Machle

KE 0014583

[redacted]

Samples of urine and blood submitted for lead analysis by Dr. [illegible] F. Machle 1-19-42. Patient referred to the Laboratory by Dr. George Berger, Covington, Kentucky.

Urine

Analysis Number = 42A-135

Volume = 95 ml.

Mg. Pb/L = 0.44

Blood

Analysis Number = 42A-136

	Spectrographic	Dithizone
Grams	7.5	8.0
Mg. Pb/100 gm.	0.075	0.070

Samples Received: 1-19-42

Samples Reported: 1-21-42

KE 0014584

[redacted]

Samples of urine and blood submitted for lead analysis by Dr. William F. Ashe. Patient referred to the Laboratory by Dr. George Berger, Covington, Kentucky.

Urine #2

Analysis Number = 42A-209

Volume = 100 ml.

Mg. Pb/L = 0.13

Blood #2

Analysis Number = 42A-210

	Spectrographic	Dithizone
Grams	Lost	11.0
Mg. Pb/100 g.		0.075

Samples Received: 1-30-42

Samples Reported: 2-4-42

KE 0014585