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February 28, 1991

REDACTED

Addie Carter-Lester
CIGNA
Media Comp Center
P.O. Box 171
Media, PA 19063

RE: V
VS: The Sherwin-Williams Co.
NO: 395 C 288869 9
D/E: 9/28/90

Dear Ms. Carter-Lester:

This is a 62-year old gentleman employed by the respondent from 12/9/46 to 10/1/90 in the capacity of a material handler, alleging exposure to the dust, fumes and chemicals indigenous to this industry until his retirement, stating he presently feels better. During the course of his employment he noted the onset of shortness of breath and a non-productive cough for 20 years, alleging the above mentioned exposure. He has seen his family doctor, Dr. DeMayo and Dr. Mazzarella of Nutley, NJ and takes Tagamet, Iberet, Folic, diuretic and has internal bleeding, he states. In 1988 he had unemployment compensation. He was in Overlook Hospital in Summit, NJ in 1990 for internal bleeding and in 1988 was in Clara Maass in Belleville, NJ for same.

Past Medical History: Denies additional significant medical or surgical illnesses.

Social History: He is married with three children. He is a non-smoker.

Family History: Non-contributory.

Review of Systems: No other minor complaints referable to other systems. Currently takes medication noted above.

Physical Examination: Well-developed, well-nourished, in no distress. Height, 5', 9"; weight, 180; blood pressure, 120/80; pulse, 74 and regular.

HEENT: PERLA

Neck: Supple, no thyromegaly, no bruits.

Chest: Good excursions bilaterally. Clear to auscultation and percussion. Breath sounds normal in all lung fields, with normal and accentuated breathing.

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Cardiac: Normal palpatory findings, no murmurs, gallops or rubs appreciated.

Abdomen: No LKS, no bruits.

Extremities: No cyanosis, clubbing or edema.

Neurological: Normal sensory motor exam, normal reflexes, normal cranial nerves.

EKG: Normal sinus rhythm. Normal axis. P-R and QT intervals normal. QRS and ST-T all normal. Interpretation: Normal record.

Chest x-ray: Bony thorax intact. Lung fields are clear. Cardiac silhouette not unusual. Interpretation: Normal chest x-ray.

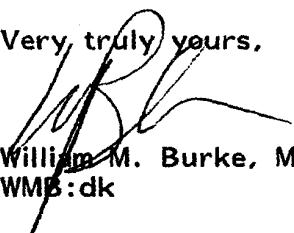
Pulmonary Function Studies: FVC predicted 4.39 liters, patient 2.18 liters, 50%; FEV 1/FVC ratio, predicted 75%, patient 78%; FEV 3, 100%. FEF values, 51%; SaO₂, 98%. Interpretation: Decreased FVC, FEV 1/FVC ratio and FEF with a normal SaO₂.

Comment: This patient alleges a pulmonary disability arising out of employment by the respondent. Based upon chest x-ray, pulmonary function studies, SaO₂ studies and physical examination, there is a decrease of FVC, FEV 1/FVC ratio and FEF and with the normal SaO₂, there is a 3% partial total pulmonary disability, regardless of cause.

Conclusion: 3% partial total pulmonary disability, regardless of cause.

Thank you for referring this interesting case for our evaluation.

Very truly yours,


William M. Burke, M.D.
WMB:dk

(Signed, but not read)

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