See R. J. Buck's letter 11/14/47 in Jeil File

March 10, 1947

Mr. Philip Drinker,
Department of Industrial Hygiene,
Harvard University School of Public Health,
55 Shattuck Street,
Boston 15, Mass.

Dear Phil:

I have your letter concerning our collaboration in analytical work from time to time as required by circumstances at Alton, Illinois plant of American Smelting and Refining Company. We shall be very glad to do what we can to assist you and them in this matter, although we are quite unwilling to be drawn into situations that involve the necessity of testimony in medico-legal cases, except as such a situation is absolutely necessary. In most such situations testimony with reference to an analytical result and its meaning can be done by deposition, and perhaps we would stretch a point in a case of unusual significance.

As you are probably aware, we are not interested in diagnostic work for fees or in medico-legal work for fees, and in the regular course of our work of this type we are much more concerned to have an adequate record of the case for our own knowledge and scientific use than we are in fees. However, we collect $5.00 per analysis to cover the actual cost of the work when it is not a financial burden on a patient. Consequently, I should like to have such information in this type of case; otherwise we would not be justified in concerning ourselves with it, since as you will probably realize, our facilities could be used entirely in this type of work if we were willing to permit it.

The only other point of importance is that we do not like to examine aliquots of any material. Not only is the difficulty of aliquotion too great in our minds, especially in the case of a sample of urine, but also we do not like to do analyses on samples except as they are collected in our containers by methods which we prescribe. (The moment a sample of urine has developed a precipitate, it is no longer suitable for aliquotion, since the precipitate is likely to adhere to the container and since it always contains a sizable portion of the available lead.) We do not like to analyze a single sample of anything, in relation to a diagnostic problem. Rather we insist upon having multiple samples or more than one material. Our routine in these cases consists in providing the equipment for taking two samples of blood and a spot sample of urine, with instructions for both procedures. The containers can be mailed to and fro, and the results can be made available within

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48 hours after we receive the samples. In this way we feel sure that we can obtain reliable results which we can safely interpret. This is the procedure that I would suggest in the occasional case in which our assistance may be desired. There will then be no question whatever about the accuracy of the results of the validity of the conclusions drawn in relation to a clinical record and an occupational history. Incidentally the tubes which we supply are a modification of a Keydel tube, into which blood can be drawn with a minimum of difficulty and with little or no opportunity for contamination. We require two samples but charge for only one analysis, since for our own purposes we choose to take two analytical methods in parallel. This makes a little additional trouble, but when the results agree all around, the probabilities in relation to chance errors are sosmall as to be at the vanishing point.

I hope this proposal will suit you and your friends in the American Smelting and Refining Company.

Sincerely yours,

Robert A. Kehoe, M. D.

RAK ef

C.C.: Mr. L. J. Buck

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