

C O P Y

STANDARD OIL COMPANY
Incorporated in Kentucky

Louisville, Ky.

April 20, 1935.

Mr. E. W. Webb, Pres.,
Ethyl Gasoline Corporation,
Chrysler Building,
New York City, N. Y.

Dear Sir:

Sometime in December, [REDACTED], one of our Tankwagon Salesmen in Birmingham, had an accident that supposedly resulted in a slight hernia; several weeks ago, his case became slightly aggravated, resulting in our sending him to a Dr. Turlington for a complete examination and I am attaching hereto copy of Dr. Turlington's report recommending an operation. This apparently was decided on, but after another check-up on the part of Drs. E. P. & Geo. A. Hogan, they developed a slight trace of lead poisoning, as outlined in their report, copy also attached, which, you will note, has resulted in a slight delay at least in this operation.

Further, you will note in Dr. Hogan's report, a check on another one of our Tankwagon drivers at Birmingham, viz; C. H. Lloyd, developed slight symptoms of lead poisoning and we are referring these cases to you for your further advice, either as to additional procedure for us to take or whether you will desire to arrange to have one of your Company surgeons examine these two men.

Your prompt reply will be appreciated.

Very truly yours,

(SIGNED) W. G. VIOLETTE

JCD/CM

119 0010736

C O P Y

STANDARD OIL COMPANY
Incorporated in Kentucky

From:

Birmingham, Ala.

4/13/35 MCH CE&P MCH

TO:

Mr. J. C. Steidle, Louisville, Ky

Attention Mr. J. J. Hettinger

- - Injury - [REDACTED] - Tankwagon

Following my letter April 2nd on the above. Mr. [REDACTED] entered the Birmingham Baptist Hospital Sunday April 7th to be operated on Monday morning April 8th, but was not operated on because his blood test showed a trace of lead, or as termed in Doctor Hogan's report, carbon monoxide poisoning was positive. This coupled with the condition as shown in the attached report on his Urine, accounted for postponing the operation.

When the hospital discovered the lead trace in Mr. [REDACTED] blood, they checked into his personal history and found out that he had been in contact for a number of years with Ethyl gasoline. Not being thoroughly convinced that they were right, they kept Mr. [REDACTED] in the hospital and made another test Tuesday, April 9th, which showed the same condition and to further check themselves they asked Mr. [REDACTED] if he had a friend with the company in the same line of work that would submit to a test in order that they further check, and Mr. C. H. Lloyd, Tankwagon salesman and friend of Mr. [REDACTED] submitted to the test, and his blood was found to contain lead, as per the attached report. Mr. [REDACTED] brother, [REDACTED], who is agent at Calera, had come to the hospital to see his brother and he submitted to test, but this was found negative. This condition of Mr. Armstrong was not reported until Thursday, April 11th. The test on [REDACTED] and [REDACTED] brother was made without our knowledge.

Doctor Geo. Hogan, [REDACTED] doctor, and physician, is very reputable and enjoys a wonderful reputation in Birmingham. He states that this condition is not serious and that it might be found prevalent in six out of ten men handling Ethyl gasoline or driving motor trucks consistently, and in his opinion would clear up in 72 to 96 hours where a man was not in contact with handling a lead gasoline or driving a motor truck. He further stated in [REDACTED] and [REDACTED] condition that there was no indication of lead poisoning or rheumatism arthritis.

Dr. L. F. Turlington, who does a great deal of our work, and who had examined Mr. Armstrong as per copy of report forwarded you February 23rd, was consulted and he got in touch with Doctor Hogan and it is Doctor Turlington's opinion that there is nothing to be alarmed about, still he believes that we should not let this go without a complete examination of Mr. [REDACTED] as well as some of the other employees because of the danger of lead poisoning, which I understand from him could show up in the employees should their systems become weakened because of other troubles. We would like to have your opinion in this connection.

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COPY

[REDACTED] has now decided to wait awhile to have this hernia repaired, and, cannot and should not force him into the operation. I am giving you detail facts regarding lead condition of the blood for the reason you might desire to bring this to the attention of the Ethyl Gasoline Corporation medical authorities.

We are putting in line for payment, bill in the amount of \$10.00 charged by Doctor Hogan for the information he has furnished us and consultation with Doctor Turlington. We will be glad to hear from you further in this connection and will keep you fully informed.

165 0010738

C O P Y

HOGAN CLINIC

920 South 20th Street

Birmingham, Alabama

April 12, 1935.

Manager,
Standard Oil Company
City.

Dear Sir:

As per your request yesterday over 'phone, I am giving you the report of the laboratory findings of blood and urine made at the Baptist Hospital of Mr. [REDACTED], which are as follows:-

BLOOD
4/8/35

Hemoglobin-----105%
Red Cells per c. mm--6,860,000
Color Index-----1
Coagulation Time---3 minutes
Abnormal Red Cells---A variation in
size and shape of red cells two
stippled red cells.

Leukocytes per c. mm-----11,650
Lymphocytes-----15%
Large Mononuclears-----8%
Neutrophils-----70%
Eosinophils-----4%
Basophils-----1%
Abnormal white cells--myelocytes- 2%

URINE
4/8/35

Color--straw
Appearance--clear
Reaction---Alkaline
Specific gravity- 1.008
Albumin--positive
Sugar-----negative

Bile--neg.
Indican--neg.
Acetone---neg.
Deacetic acid--neg.
B-Oxybutyric acid--neg.
Urea--neg.
Albumin (Quant)--20 mg.
Sugar (Quant)--neg.

Casts-several
casts of crystal
Leukocytes & pus
large clumps
Red Cells-occasional
Crystals - large
plate like
Others findings--
bladder epithelia tissue
shread.

BLOOD
4/9/35

Hemoglobin--105%
Red Cells Per c. mm-6,320,000
Abnormal Red Cells--one

Leukocytes Per c. mm-- 9,200
Lymphocytes---24%
Large Mononuclears---2%

C O P Y

BLOOD 4/9/35 (cont'd)

Test for carbon monoxide poisoning is positive.

On account of the blood finds, as well as urine, we thought it best to postpone operation for a few days for further observation. On account of the postponement, Mr. Armstrong became so very nervous that we thought it advisable to let him go home for a few days and rest up.

It's the opinion of my brother, Dr. E. P. Hogan, who saw Mr. [REDACTED] with me, as well as the opinion of Dr. George Graham, pathologist, who saw Mr. Armstrong, that there is nothing about his condition that would prevent our proceeding to repair the hernia.

Very truly,

/s/ GEO. A. HOGAN

Attached I am sending you laboratory report of [REDACTED] and Mr. [REDACTED]

C O P Y

BIRMINGHAM BAPTIST HOSPITAL

PATIENT

AGE

DATE 4/11/35

DOCTOR

LAB. NO.

MATERIAL SUBMITTED

EXAMINATION REQUESTED

LABORATORY REPORT

[REDACTED] blood tested for carbon monoxide--
faintly positive

[REDACTED] -----Negative

M. M. GORGAS
Laboratory Technician

VC 0010741

C O P Y

LEE F. TURLINGTON, M. D.

938 South 20th Street

BIRMINGHAM, ALABAMA

February 11, 1935.

Standard Oil Company,
Birmingham, Alabama.

Attention: Mr. Mike Hines

Re: - [REDACTED]

Dear Sirs:

This patient was examined as per your request. I found on the left side an indirect inguinal hernia, which has descended just passed the external inguinal ring; in other words, the hernia is small and probably has not been present for a long time.

In view of the type of work that this man does, I think there is not doubt that the hernia will enlarge and give him disabling trouble, unless a truss could be used to correct it. At best, a truss is extremely objectionable from the patient's point of view and as you know, is not entirely reliable as a treatment. Under the circumstances, I think it best that you suggest the he have an operation for a permanent cure of the hernia. I should say the operation would incapacitate him for about six weeks.

Thank you for referring the patient to me.

Very sincerely,

/s/ LEE F. TURLINGTON, MD.

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