Castleman File: American Petroleum Institute
w/c = with cover letter or memo If DATE = 0, undated
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___ published article from trade journal

___ published advertisements

___ newspaper article

___ published government report

___ government inspection results

___ unpublished or internal report

___ unpublished presentation from conference

___ letter

___ memorandum

___ industry warning labels

___ industry sales literature

___ industry recommended practices

√ meeting minutes (with attachments) 5/45

___ membership list

___ BC notes

For Information Only - Not for Publication

AMERICAN PETROLEUM INSTITUTE
MEDICAL ADVISORY COMMITTEE

Minutes of Meeting
May 7-8, 1945
Hotel Statler
St. Louis, Missouri

MEMBERS PRESENT:

McIver Woody - Chairman
D. V. Stroop - Secretary

J. M. Adams	D. M. English	M. N. Newquist
W. O. Armstrong	T. M. Frank	I. E. Percy
V. C. Baird	A. E. Hoag	B. B. Reeve
F. F. Boys	R. A. Jewett	O. S. Somerville

MEMBERS ABSENT:

Wm. Russell Levis	J. F. Peattie
W. A. Morrison	H. S. Thomson

ASSOCIATES PRESENT:

E. W. Adams	Standard Oil Co, (Indiana),	Chicago, Ill.
L. C. Beard, Jr.	Socony-Vacuum Oil Co., Inc.	New York, N. Y.
R. S. Bonsib	Standard Oil Co. (N.J.)	New York, N. Y.
R. C. Cole	Phillips Petroleum Co.	Bartlesville, Okla.
Wm. Grant, Jr.	Humble Oil & Refining Co.	Houston, Texas
H. R. Kemmerer	Shell Oil Company	Wood River, Ill.
A. J. Koewing, Jr.	Socony-Vacuum Oil Co., (Lubrite Div.)	East St. Louis, Ill.
E. P. Lankelma	Standard Oil Co. (Ohio)	Cleveland, Ohio
H. R. Warrick	The Texas Company	New York, N. Y.
F. M. Watkins	Sinclair Refining Co.	East Chicago, Ind.

GUESTS:

Wm. W. Brooks, M.D.	Phillips Petroleum Co.	Phillips, Texas
R. H. Gould	" " "	Bartlesville, Okla.
F. F. Heyroth, M.D.	Kettering Laboratory	University of Cincinnati

I

Choice of Chairman for 1945.

Following a review of the origin and purpose of the Medical Advisory Committee, McIver Woody was chosen to serve as chairman for 1945.

II

API 06766

Medical Problems in Hydrocarbons

By invitation Doctor Heyroth reviewed data and sources of data on the toxicology of hydrocarbons which recently have become important because of the rapid growth in their production.

Action: The committee tendered Doctor Heyroth a vote of appreciation and thanks for his presentation and requested him to send a copy of his review to the secretary so that copies could be distributed to members and associates.

III

List of Current Medical Problems

A canvass of members resulted in the listing of a number of substances and mixtures which may be injurious to persons through contact, absorption, or inhalation. In addition a number of subjects involving matters of policy and administrative practices were suggested for committee consideration.

The committee discussed several bases for classifying problems for inclusion in its program of work, as follows:

1. By groups of substances or mixtures, such as types of hydrocarbons, inhibitors, additives, catalysts, or acids.

2. By the manner in which substances may injure persons, such as skin contact, absorption, or inhalation.

3. By the method of solution to be used on problems, such as cooperative compilation of clinical data, literary research, or laboratory research.

Action: The committee did not agree upon a comprehensive classification of the full list of problems but it was in agreement on four studies which should be initiated in 1945, as follows:

1. The study of medical policies and practices and formulation of tentative procedures for guidance of medical men in industry.

2. A study of chlorinated compounds, particularly chlorinated cutting oils used in petroleum products, and of their effects.

3. A study of possible carcinogenic properties of hydrocarbons and petroleum products.

4. Preliminary reviews and studies as to the toxic effects and properties of hydrocarbons, products and substances other than those included in items 2 and 3.

The chairman was authorized to appoint four subcommittees to undertake these studies.

Notes by Secretary: (1) An outline of the field of interest of members, as developed at the meeting, is appended to these minutes.

(2) The chairman announced the memberships of subcommittees, as follows:

a. Subcommittee on Medical Policies and Practices

R. A. Jewett, Chairman
J. M. Adams
T. M. Frank
W. A. Morrison
J. F. Peattie
I. E. Percy
H. S. Thomson
McIver Woody, Ex Officio
D. V. Stroop, " "

b. Subcommittee on Chlorinated Compounds

F. F. Boys, Chairman
A. E. Hoag
M. N. Newquist
B. B. Reeve
McIver Woody, Ex Officio
D. V. Stroop " "

c. Subcommittee on Carcinogenicity

M. N. Newquist, Chairman
J. M. Adams
A. E. Hoag
Wm. Russell Lewis
I. E. Percy
McIver Woody, Ex Officio
D. V. Stroop, " "

d. Subcommittee on Permissible Concentrations

V. C. Baird, Chairman
W. O. Armstrong
D. M. English
T. M. Frank
O. S. Somerville
McIver Woody, Ex Officio
D. V. Stroop, " "

IV

Contribution and Dissemination of Information

Contributions of literature reviews were contributed to the Committee by the following:

1. Library of the Technical and Research Division, The Texas Company

"The Carcinogenicity of Bituminous Compounds," April 30, 1945

2. Chemical Division, Socony-Vacuum Oil Co., Inc.

"Carcinogenic Hydrocarbons," April 27, 1945

Another contribution will be made by a third company if, as, and when brought up to date and authorized for release to the committee.

Action: On motion it was agreed that the name of each duly authorized associate should be placed on the committee mailing list to receive contributed material as well as other committee communications.

V

Medical Research Program

Following luncheon meetings of three of the four subcommittees, informal reports containing preliminary recommendations on research work were presented by subcommittee chairmen.

The committee's conclusions and recommendations on the subject of research were incorporated in a draft of letter addressed to the president of the American Petroleum Institute.

Action: On motion it was voted unanimously that the secretary should transmit the following letter:

Mr. Wm. R. Boyd, Jr., President
American Petroleum Institute
50 West 50th Street
New York 20, N. Y.

Medical Research Program

Dear Sir:

Pursuant to your appointment of February 23, 1945, the Institute's Medical Advisory Committee held its organization meeting in St. Louis, Mo., on May 7 and 8, 1945. Thirteen of its seventeen members and all of its associate members were present.

Discussion developed a broad field of interest in subjects of importance to the petroleum industry, particularly to petroleum refiners.

The committee selected four groups of these subjects upon which to start work in 1945. Subcommittees were appointed to prepare detailed plans for cooperative and research work on these problems. Three of the subcommittees have found there is need for research work in their assignments. The medical advisory committee concurs in these findings and recommends to the Executive Committee of the Board of Directors that it should authorize a three-year program of medical research to be conducted under the auspices of the American Petroleum Institute with the guidance and advice of the Medical Advisory Committee and including general provisions as follows:

1. The Institute should be authorized to solicit contributions for the establishment of a Special Medical Research Fund in the amount of $25,000 with which to initiate the program.

2. There should be three medical research projects established to investigate and to report on subjects as follows:

a. Chlorinated compounds used in petroleum products.

b. The effect of refinery processes upon carcinogenic properties of petroleum products.

c. The determination of best values for permissible concentrations of toxic substances used and produced in the petroleum industry.

Respectfully submitted on behalf of the Medical Advisory Committee

By (D. V. Stroop)
Secretary

VI

Publicity

There was a consensus that the secretary should prepare such press release as may be deemed necessary in connection with the organization of the Medical Advisory Committee.

VII

Next Meeting

There was a consensus that the next meeting should be held during October or November, 1945, and immediately prior to the 25th Annual Meeting of the Institute if it is held in November, 1945.

VIII

Adjournment

The committee meeting was adjourned.

APPROVED

McIVER WOODY
Chairman

D. V. STROOP
Secretary

f
5-18-45

Appendix
to
Minutes of Meeting
Medical Advisory Committee
Held May 7-8, 1945

An Outline of the
Field of Interest of the
API Medical Advisory Committee

I Industrial Health and Related Subjects

A. Matters Incident to Employment of Persons in Petroleum Industry, such as:

1. Preplacement examination procedures

2. Reexamination practices

3. Rehabilitation of returning war veterans

4. Treatment of employee sickness and sick benefits

5. Acceptable standards in sanitation and healthful working conditions

6. Effect of air conditioning on health

B. Matters Incident to Possible Injury to Employees, such as:

1. From skin contact with substances which may result in:

a. Injury to skin, including

(1) Possible carcinogenic effects

(2) Other injurious effects on skin, by substances such as

(a) Chlorinated compounds

(b) H F burns

(c) Radio-active substances

b. Absorption through skin of toxic substances

2. From Inhalation of:

a. Hydrocarbon vapors and gases

b. Solid particles including catalysts and sand-blasting sand

c. Poisons, such as H_2S, TEL, CS, HF

C. Matters Incident to Treatment of Injured Employees

1. Exchange of information on acceptable methods of treatment

D. General

1. Legislative factors

2. Research work and programs

3. Educational activities

4. Correlation of medical work with other operations in petroleum industry

II Public Health and Related Subjects

A. Labels and precautionary information

B. Pooling information to defend against fraudulent actions

C. Legislative problems.

with Dr. Drinker and others of his staff reviewing and checking the work. This committee feels that we are very fortunate in securing such an authoritative organization to do this work for us.

The third objective of our assignment will be started on the completion of the other two, and when our committee is asked to undertake the study of a specific chemical by the industry. We will welcome suggestions for specific research problems at any time.

Respectfully submitted.

V. C. Baird, M.D., Chairman

W. O. Armstrong, M.D.
D. M. English, M.D.
T. M. Frank, M.D.
O. S. Somerville, M.D.

Industrial Toxic Materials Used and Produced in the Petroleum Industry

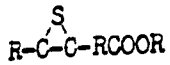
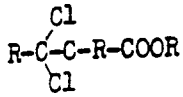
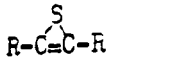
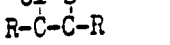
Material	Laboratory	Plant
Acetaldehyde	x	
Acetanilide	x	
Acetic Anhydride	x	
Acetone	x	x
Acetyl Chloride	x	
Acetylene	x	x
Acid Acetic	x	x
Acid Arsenious	x	
Acid Benzoic	x	
Acid Chlorosulfonic	x	
Acid Formic	x	
Acid Hydrochloric	x	x
Acid Hydrofluoric	x	
Acid Molybdic	x	
Acid Nitric	x	
Acid Phosphoric	x	x
Acid Pyrogallic	x	x
Acid Sulfuric	x	x
Alcohol, Ethyl	x	x
Alcohol, Methyl	x	x
Alcohol, Butyls	x	x
Alcohol, Propyls	x	x
Alcohol, Amyls	x	x
Aluminum Chloride	x	x
Aluminum Oxide	x	x
Ammonia	x	x
Ammonium Acetate	x	
Ammonium Chloride	x	
Ammonium Hydroxide	x	x
Ammonium Molybdate	x	
Ammonium Nitrate	x	
Amine Plastisizers, Various	x	x
Aminophenols	x	x
Amyl Acetate	x	
Aniline and Homologs	x	x
Anthracene	x	x
Aromatic Hydrocarbons	x	x
Barium Chloride	x	
Barium Hydroxide	x	
Barium Nitrate	x	
Benzaldehyde	x	
Benzene	x	x
Boron Fluoride	x	x
Bromine	x	
Butyl Acetate	x	
Butyl Sulfate	x	x
Butyl Sulfuric Acid	x	x
Cadmium Chloride	x	
Calcium Chloride	x	x
Calcium Hydroxide	x	x
Calcium Hypochlorite	x	
Calcium Oxide	x	x

Material	Laboratory	Plant
Carbon Black	x	x
Calcium Carbonate	x	x
Carbon Disulfide	x	
Carbon Monoxide	x	x
Carbon Tetrachloride	x	x
Cerous Nitrate	x	
"Chlorex" (B B Dichloroethyl Ether)	x	x
Chlorene	x	x
Chlorobenzene	x	
Chloroform	x	
Chromate Salts	x	x
Chromium Trioxide	x	
Cobaltous Nitrate	x	
Cresols, Mixed	x	x
Cumene	x	x
Cupric Acetate	x	x
Cupric Chloride	x	
Cupric Sulfate	x	x
Cuprous Ammonium Acetate	x	x
Cyclohexane	x	x
D D T	x	x
Ether, Diethyl	x	
Ether, Isopropyl	x	
Ether, Petroleum	x	x
Ethyl Acetate	x	x
Ethyl Sulfate	x	x
Ethyl Sulfuric Acid	x	x
Ethylene Dichloride	x	x
Ferric Chloride	x	
Ferric Nitrate	x	
Ferric Oxide	x	x
Ferric Sulfate	x	
Ferrous Sulfate	x	
Formaldehyde	x	
Freon	x	x
Furfural	x	x
Gasoline Gum Inhibitor	x	x
Glycols	x	
Gum Kauri	x	
Hydroquinone	x	x
Hydrogen Chloride	x	x
Hydrogen Fluoride	x	
Hydrogen Sulfide	x	x
Hydroxylamine Hydrochloride	x	
Iodine	x	
Iron Carbonyl	x	
Lead Oxide	x	x
Lead Sulfide	x	x
Lorol Mercaptan	x	x

Material	Laboratory	Plant
Magnesium Sulfate	x	
Maleic Anhydride	x	
Mesityl Oxide	x	x
Mercury	x	x
Mercuric Nitrate	x	
Mercaptans, Various	x	x
Mesitylene	x	x
Methyl Chloride	x	x
Methyl Cyclohexane	x	x
Methyl Cyclopentane	x	x
Methyl Ethyl Ketone	x	x
Methyl Sulfate	x	
Naphthalene	x	x
Naphthas, Light	x	x
Naphthas, Solvent	x	x
Naphthols	x	x
Nitrobenzene	x	x
Nitroaromatics	x	
Nitroparaffins	x	x
Phenol	x	x
Phenolic Homologs	x	x
Phenyl-B-Naphthylamine	x	x
Phosphates	x	x
Pickling Solutions (Arsenates)	x	x
Potassium Bromide	x	
Potassium Chloride	x	
Potassium Chromate	x	
Potassium Hydroxide	x	
Potassium Iodine	x	
Potassium Nitrate	x	
Potassium Permanganate	x	
Pyridine	x	
Propyl Sulfate	x	x
Propyl Sulfuric Acid	x	x
Quachrome Glucosate	x	x
Silica	x	x
Silver Nitrate	x	
Sodium Carbonate	x	
Sodium Hydroxide	x	x
Sodium Plumbite (Doctor)	x	x
Sodium Thiosulfate	x	
Sodium Sulfide	x	x
Stannic Chloride	x	
Styrene	x	x
Sulfur	x	x
Sulfide Plastisizers	x	x
Sulfur Dioxide	x	x
Sulfur Trioxide	x	x

Material	Laboratory	Plant
Tetraethyl Lead	x	x
P-Tertiary Butyl Catechol	x	x
Triethanol Amine	x	x
Toluene	x	x
Toluedene	x	x
Trichlorethylene	x	x
Xylenes	x	x
Zinc Acetate	x	
Zinc Chloride	x	x
Zinc Stearate	x	x

Another Company submitted the following materials:

	Sulfurized methyl oleate
	Methyl di-Chlor Stearate
	Sulfurized olefin (10 to 30 carbon atoms)
	Chlorinated dibenzyl disulfide
R-Cl	Chlor Naphthalene
HOROROH	Diethylene gycol
PbR	Lead oleate
R_4Si (Oxygen, hydrogen)	Aliphatic and aromatic silicanes or silicones
R N	Aliphatic and aromatic nitrogen compounds
R S	Aliphatic and aromatic sulfur compounds
R Halogen	Aliphatic and aromatic halogen compounds (Fluorine, Chlorine, Bromine, Iodine)

Still another Company submitted the following materials:

Hydroformer bottoms
Heavy aromatic residues
Cat-cracker slurry
Butadiene
Open chain diolefins
Ring chain diolefins
Toluene sulfonic acid

APPENDIX D

For Information Only - Not For Publication

REPORT OF SUBCOMMITTEE ON MEDICAL POLICIES AND PRACTICES

Your Subcommittee on Medical Policies and Practices has very little to report in the way of progress. This is probably due to the fact that a meeting of the subcommittee members could not be secured.

Shortly after my return from the St. Louis meeting, I decided that a committee to study into medical policies and practices of oil companies could not make progress or recommendations without first knowing the existing policies and practices. I, therefore, formulated a questionnaire embodying the information brought out and requested at the St. Louis meeting, sent a copy of this questionnaire along with a letter to each of my subcommittee members requesting their criticisms, suggestions, and approval to send such a questionnaire to Medical Directors in Petroleum industries. I received no replies from the subcommittee members.

I next asked Dr. Morrison of Los Angeles, and Dr. Thomson and Dr. Peattie of San Francisco to meet with me in San Francisco the middle of August. Dr. Morrison replied that he would try to see me on my return, but to proceed without him. In San Francisco Drs. Thomson and Peattie did give me an hour of their time but indicated they did not intend to serve on the subcommittee. They approved sending out the questionnaires as presented. They further agreed that they would meet with me in Los Angeles the first of October to review and evaluate the results obtained. They have been unable to come to Los Angeles to date. I am reviewing the data obtained from the questionnaires and presenting it to you as part of this report for your evaluation and action.

Upon receiving notice for the Committee meeting in Chicago on November 16th, I wrote my subcommittee asking them to meet with me in Chicago for a subcommittee meeting on November 15th. In reply to this letter I have one from Dr. Percy stating he would be there and one from Dr. Frank stating he would probably be there.

It being extremely difficult for me to be away a week for the purpose of attending the one-day meeting in Chicago, and being unable to have a meeting of my subcommittee, I decided to ask Dr. Percy to present my report for the committee.

ANSWERS AND EVALUATION OF ANSWERS ON EIGHT QUESTIONNAIRES RECEIVED FROM MEDICAL DIRECTORS OF THE MEDICAL ADVISORY COMMITTEE OF THE AMERICAN PETROLEUM INSTITUTE.

I. MANAGEMENT:

Is your medical service under the direction of a doctor?

	Yes	8

Responsible to:

President	2
Industrial Relations Manager	3
Personnel Manager	1
Manager of the Refinery	2

Full time doctor in charge:	Yes	5

Part time doctor in charge: Yes 3

Total number of employees covered by the survey:
Male 87,000 Female 11,000

Are most of the employees in one location?
Yes 3 Scattered 5

Note: Two medical directors replied that they could not answer the questionnaire because of the scattered locations of the employees.

How is the medical service coordinated with the other operations?

Safety	3			
By:	Medical Claims Dept.	1	Employment	2
By:	Personnel Manager	2	Pay plans for disability	2
By:	No coordination	5	Absenteeism	2

Note: The purpose of this question was, apparently, not well understood as it is believed there is some definite coordination between these plans and medical service. It is further believed that most companies have some sort of pay plan for sickness and that absenteeism involves the medical service records and follow-up work with a report to the Management.

II. NATURE OF SERVICE RENDERED:

A. Care of the injured under liability laws by:

Company selected doctors	8
Insurance carrier selected doctors	0
Employees' selected doctors	0

Note: It is apparent that all the companies responding are self-insured and select their own doctors.

B. Preemployment examinations:

Note: What is the best title for this:
Preplacement 4
Preemployment 4

Preplacement examinations required for males: Yes 8 No 0

Preplacement examinations required for females: Yes 8 No 0

Are they made by company selected doctors? Yes 8 No 0

Employee selected doctors? None

Is a prepared company physical examination form record used?
Yes 8 No 0

Note: Six blank physical examination forms were forwarded. A review of these six indicates that they are quite varied in form and in questions asked.

Are there any physical impairments or defects ordered rejected?

Yes 7 No 1

Recurrent Rheumatism	2	Chronic suppurative conditions	1
Contagious diseases	1	Epilepsy	1
Osteomyelitis	1	Diabetes	1
Varicose veins	2	Hernia	4
Vision less than 20/50	4	Heart disease	4
Tuberculosis	2	Hypertension	1
Allergies	1	Mental disease	2
Obesity	1		

Note: Ordered rejected is meant definite instructions, to examining doctors to reject certain conditions. It should go without saying that there are many conditions for which an applicant is rejected. Several reports attempted to list many of these conditions and stated all sorts of physical and mental conditions. It is believed as few conditions as possible should be ordered rejected thus giving the examining doctor a wide range for using his judgment in proper selection and placement.

Can medically rejected applicants be accepted for employment?

Yes 6 No 2

If yes - by whom? Management 6

Is a blood test for Syphilis required?

Yes 8 No 0

If females are examined, is a pelvic examination required or optional?

Optional 6
No examination 2

This part of the female anatomy is more subject to pathology than any other part and the above indicates that it is neglected on examinations. This applies particularly to married women.

C. Reexaminations:

Made on all employees? Yes 1 No 7

Note: Two replied that company officials are required to be examined annually; one replied that annual examinations are required on all employees hired after the installation of the medical service. One replied reexaminations are required upon return from sick leave. Four make examinations on employees working in hazards

Are there special arrangements whereby executives have an annual examination by the company medical service? Yes 4
By a physician of their own choosing? None

Physical examinations are the basis of a health program. Therefore, annual examinations should be required on all employees.

III. MEDICAL SERVICE TO SICK AND NON-INDUSTRIALLY INJURED EMPLOYEES:

Is medical advice available by company personnel to all employees?
Yes 5 No 3

To groups of employees only?
Yes 1 No 1

At no cost to employees?
Yes 3 No *
*Not noted in five questionnaires

At a cost to employees?
None

Three of the companies have prepaid medical, surgical, and hospital service through company operated plans.

There are no employee operated plans but a few groups in various localities so operate.

Joint company and employee operated plan?
None

With the public emphasis strongly for prepaid medical and hospital service, it would seem that all companies should have such a plan.

IV. RELEASES FOR DUTY:

Are releases for duty to resume work required of employees who have been off for sickness, accident, or personal reasons?

Yes	7	After seven days	3
		After five days	1
		After three days	1
		For a day or more	1
		Do not require	2

V. NURSING SERVICE:

Are all nurses, if any, working under the supervision of a doctor?
Yes 8

Is any home nursing service rendered?	Yes	4	No	2
If so, at company expense?	Yes	2	No	1
At employees' expense?	Yes	?	No	2

Is there any follow-up of absenteeism by nurses? Yes 5 No 3

Note: It is believed home visitation by a nurse should be part of a medical service because it produces valuable contacts with the employees and reduces lost time from sickness.

VI. RECORDS:

Are all records of sickness and accidents pertaining to medical service rendered, kept in the medical department?

Yes 5 No 3

It would seem good practice to have all medical records and reports in the files of the medical department.

If so, is the information available only through doctors and nurses in charge?

Yes 6 No 2

If not, who is entitled to this information?

Executive	4
Department Head	1
Industrial Relations Manager	1

Are the reasons of absenteeism as shown on the records, reported to any superiors?

Yes 6 No 3

If so, to whom and why?

Industrial Relations Manager	1
General Manager	3

For the purpose of control for the Management of sick benefits.

Note: It is strongly indicated that executives and department heads require a report of diagnosis on employees off on account of sickness whereas, it would seem that the amount of time lost would suffice and that the diagnosis should be a confidence of a medical department.

VII. REHABILITATION:

Is there a company plan for placement of handicapped employees?

Yes 4 No 4

Handicapped veterans?

Yes 4 No 4

Note: Definite plans for rehabilitation are indicated in order to give the handicapped an equal opportunity for employment.

VIII. SANITATION AND HYGIENE:

a. Any educational activities for better health?

Yes 2 No 6

If yes, list them.

Employees Magazine

It is believed there are more educational measures being carried out than indicated by the above. If not, a big field is open for constructive results by the medical departments. An organized health educational program should be carried out in each industry.

5. Inspections:

Are inspections of offices and plants made?
Yes 7 No 1

If so, by whom?

Safety man	4
Doctor	2
Plant Manager	1

Conditions noted: Light 7 Heat 7 Ventilation 7 Dust 8 Fumes 8

Special hazards: Skin irritations 5 Chlorinated compounds 3
Acids (especially HF) 7 Radio active substances 3
Hydrocarbon vapor and gases 7 Poisons 5
Solid particles 6
Any air conditioning in offices and plants?
Yes 3 Some 3

Note: It is apparent that medical personnel are losing an opportunity to familiarize themselves with the employees and the hazardous conditions under which they work and are not making reexaminations of employees in hazardous work as indicated. This work will probably be emphasized by the reports of the other committees.

IX. RESEARCH WORK AND PROGRAMS:

List any projects being carried out, if not confidential.
None 7 Confidential 1

No report of any anticipated projects.

Note: Problems requiring research are presented to the medical departments from time to time. It would appear that this field is neglected especially in relation to the amount of research done by petroleum companies. Probably much material can be obtained from outside sources. Some channel by which this material can be distributed to medical departments is indicated.

X. LEGISLATION AND LEGAL MATTERS:

What source of information of being informed of proposed medical legislation affecting the petroleum industry?

Three replied that information was obtained through medical societies through legal departments and self-insured associations.

Note: The whole question of legal legislation was mentioned several times at the meeting but in rather vague terms. It is evident from the answers that there is no real source of information on these subjects available to medical departments.

XI. COMMUNITY HEALTH:

Are proper precautionary information measures used to protect the public from health hazards arising out of the use of petroleum products?

No 3 Yes 5

What cooperation is maintained by the medical department with private physicians treating employees, with City, County and State Health Departments?

This question was answered by six who simply said "as occasions arise."

Two said "complete."

What non-official and private health agencies?

Seven replied "none."

Note: It should go without saying there is some cooperation with non-official and private health agencies as these agencies are always asking for donations or doing research work which has a direct bearing on problems in the oil industry. It would seem valuable to maintain contacts with such agencies especially those who can secure and furnish data on medical problems and give guidance of these agencies in their relation to the medical profession and medical service in industry.

DISCUSSION

The above, to a certain extent, brings out some of the policies and practices of eight of the major oil companies. Why the five other Medical Directors who are members of the General Committee did not attempt to furnish the information asked for, is problematical. It is readily understood why two said their operations were too diversified to answer such a questionnaire.

It is difficult to formulate a questionnaire embodying the items as mentioned in the medical meeting on which information is desired. This is evident all through the answers. An active committee, reviewing this questionnaire, discussing it, would, doubtless, improve it considerably and would have more information from it for evaluation and use.

It was my intention to assign one of the following topics to each member of the committee and request him to gather information on it and present a special report on that subject. It was also my intention to send this questionnaire, not only to members of the Medical Advisory Committee, but also to all petroleum companies for the purpose of having more information available for evaluation. The response was so poor from my subcommittee members and from the general committee members that it was decided not to attempt anything further at this time.

The following topics could well be given special consideration:

1. Formulation of a physical examination record as short as possible and including enough subheadings to get all information desired.

2. Prepaid medical plans.

3. Rehabilitation plans.

4. Educational measures.

5. A research plan.

6. A legislative plan.

It is evident that medical directors in the petroleum industry were not in a position to take time for consideration of their policies and practices during the past six months. This was probably due to lack of help and reconversion from a war basis to a peace basis. It is to be hoped that their interest will become aroused sufficiently to carry out the following recommendations:

That a Committee on Policies and Practices be organized whose members are in a position to and are willing to meet for discussion of the problems assigned them.

That each committee member select one of the above topics as outlined for his special study and report.

Respectfully submitted,

/s/ R. A. Jewett
R. A. Jewett, M.D., Chairman,
Subcommittee on Policies and
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