

*Insulators -
Asbestos survey*
UNIVERSITY OF CINCINNATI
COLLEGE OF MEDICINE

6/23/69
Dr. Felson

ADDRESS:
DEPARTMENT OF RADIOLOGY
CINCINNATI GENERAL HOSPITAL
CINCINNATI, OHIO 45229

ENCLOSURE 6

June 23, 1969



George Roush, Jr., M.D.
Medical Director
Ethyl Corporation
Laboratory of Environmental Medicine
1700 Perdido St.
New Orleans, La. 70112

Dear George:

~~The films on insulators have arrived and I just finished going~~
over them. Here are my conclusions:

Subject No. 1: In 1956 there is a subapical lesion on the right.
The markings to the upper lungs are a little prominent. In
1967 the chest appears essentially the same.

IMPRESSION: Inactive tuberculosis; no evidence of asbestosis.

5/17/74
No. 2: In 1958 there is apical involvement on the right
and multiple tiny scattered calcifications in the left upper
lung field. There is a suggestion of honeycombing at the right
base. In 1963, the apical lesion on the right has disappeared.
Otherwise the chest shows little change. In May 1968, the
honeycombing is more striking and it is evident at both bases
which are less radiolucent than earlier.

IMPRESSION: Inactive tuberculosis; definite evidence of progressive
asbestosis in the lower halves of the lung fields.

No. 3: The chest is normal.

5/17/74
No. 4: The film is made in expiration. There is pleural
thickening obliterating the left costophrenic angle and the
markings at the bases are prominent. Whether the latter is due
to mild involvement by asbestosis or merely represents the changes
of an expiratory phase of respiration cannot be determined. I
suggest a new film with deep inspiration.

Films No. 5 thru No. 12 are all normal.

I am returning the films to you under separate cover. My bill
is enclosed. With best regards,

Sincerely,

Benjamin Felson, M.D.

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BF/cpb

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