


Yonkers Laboratory

RE 0017017

ETHYL GASOLINE CORPORATION

25 BROADWAY

INTER-OFFICE
CORRESPONDENCE

NEW YORK June 22, 1928.

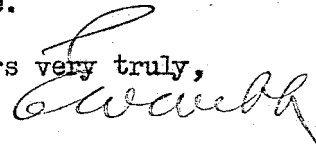
Dr. Robert A. Kehoe,

Dear Dr. Kehoe:

Herewith is copy of letter from Dr. A. W. Schoenleber of Standard Oil Company of New Jersey, Medical Department, in reference to examination by Dr. Sicard of Mr. [REDACTED] who is employed in the Yonkers laboratory, and copy of my letter of transmittal to Dr. Calingaert, also his reply which came in today.

Under the circumstances please advise what you think should be done.

Yours very truly,



A:H

Copy to Dr. Calingaert

KE 0017018

C O P Y

ETHYL GASOLINE CORPORATION

25 Broadway

New York June 20, 1928.

Mr. E. W. Webb,

Dear Mr. Webb:

I am returning herewith the letter dated June 2 and apparently mailed June 20 by the Medical Department of the Standard Oil Company of New Jersey to Mr. Mittnacht regarding Mr. [REDACTED]

I am somewhat surprised at the report. When Mr. [REDACTED] was taken sick, I received reports by telephone from Mr. Mittnacht and also indirectly from conversation [REDACTED] had with members of the laboratory staff that carbon monoxide poisoning was considered to be the possible cause of his illness. Even that, as Mr. Mittnacht told me over the 'phone, was not considered serious by Dr. Sicard. My own feeling, from the precautions we take in the engine room and from the health conditions of the other workers in that department, is that the carbon monoxide exposure was indeed extremely small. The other employee in the same department who has been sick recently, is Mr. [REDACTED]. I looked into his case when he reported his illness and talked it over also with Dr. Crudgington. Dr. Crudgington showed me from his reports that Mr. [REDACTED] has been complaining of intestinal trouble for several months and that the diagnosis was distinctly that of intestinal ulcers. The two other men in the engine room are in excellent health and have never complained of anything.

Regarding the exposure to tetraethyl lead, no concentrated Fluid is handled in the engine room, only diluted Fluid being used in testing. This Fluid is prepared in the chemical laboratory and all the engine man has to do is to withdraw small amounts of this Fluid through a burette directly into a sample of gasoline. This Fluid is kept and handled under a hood, equipped with a very strong suction. No odor of lead is at any time noticeable when working there, and I believe the exposure is cut down to a negligible amount. Last fall Mr. [REDACTED] spilled some of this dilute Fluid on his hand. This was washed off promptly. Dr. Crudgington has been out here at least one since that occurrence, and I have never received any reports of indications of lead poisoning about [REDACTED]. Mr. [REDACTED] has been out on sick leave since he was examined by Dr. Sicard three weeks ago. I was informed at his house today that he is up in the Catskills and is expected back at the end of the week.

I am somewhat surprised that the Standard Oil doctors are able to "satisfy themselves" that the symptoms are those of tetraethyl lead poisoning without even making an examination of the blood for stippling of the red cells. We can, however, send [REDACTED] out to Cincinnati for an examination when he returns or wait to act on that until he reports, and find out whether it will not be equally satisfactory to have him examined more thoroughly by Dr. Crudgington the next time he visits the laboratory.

Yours very truly,

(Signed) George Calingaert

C O P Y

ETHYL GASOLINE CORPORATION

25 Broadway

New York June 20, 1928.

Dr. George Calingaert,

Dear Dr. Calingaert:

Herewith is a letter from Dr. Schoenleber relative to recent examination by Dr. Sicard of Mr. [REDACTED] of your Laboratory dated the 2nd inst. which, however, you will observe from the attached memorandum, was misdirected and has just arrived at this office.

Under the circumstances, would it not be a good plan to have Mr. [REDACTED] take an immediate vacation in order to be restored to his normal health. The length of time, of course, would be dependent upon how long it would take him to rid himself of these symptoms.

Certainly, if they still persist in line with what Dr. Sicard found, it is not only to his interest but to ours to have him immediately disconnected with any kind of work which will further expose him to the handling of the concentrated material. You will note that he refers to one other employee having similar symptoms. Please give this your prompt attention and if there are elements of risk that can be eliminated from the work referred to, then, obviously, it is our duty to immediately make arrangements to that end.

Inasmuch as we desire that Dr. Kehoe should be fully acquainted with this situation, it strikes me that it would be a good plan to have Mr. [REDACTED] examined by Dr. Kehoe during the coming week. Dr. Kehoe would probably suggest some course of treatment which would result in more speedy recovery than otherwise. It would be more convenient, of course, to have Mr. [REDACTED] go to Cincinnati for the examination.

Would you please return the enclosed to me after it has served your purpose. I am not having a copy made for our file as there isn't time to do so this afternoon and I am very anxious to get it in your hands the first thing tomorrow morning. I just telephoned and was told you were out. The purpose of the call was to discuss the situation with you.

Yours very truly,

A:C

OFFICE OF THE COM.
MEDICAL DEPARTMENT
6051

New York June 30, 1928.

STANDARD OIL COMPANY OF NEW JERSEY

Medical Department

26 Broadway

New York June 2, 1928.

Mr. A. E. Mittnacht,
Ethyl Gasoline Corporation,
25 Broadway, New York City.

Dear Sir:

Dr. Sicard presented Mr. [REDACTED], one of the men employed at the Yonkers Laboratory, for examination. We found that Mr. [REDACTED] has been feeling unwell for the past three weeks, symptoms being loss of appetite, general malaise with considerable loss of weight, more recently insomnia and headache. He states that a few days ago on examination by his own Doctor his blood pressure was reported to be 100 to 103 systolic. We did not make urine or stool examinations, but are satisfied from the symptoms that he is suffering from early tetraethyl lead poisoning.

I am bringing this to your attention because he says that one other of the four employees engaged in this work has similar symptoms. Also because of the fact that he says they have not been instructed to take any special precautions in the handling of tetraethyl fluid; that they quite frequently spill amounts of it on their hands when withdrawing it from the container and mixing it with gasoline. He also gives an instance where a considerable amount of it was spilled on his hands at one time, though he admits that it was promptly removed by bromine.

It would seem from the above that these men are probably not using all the precautions indicated and possibly you may wish to investigate the matter.

Very truly yours,

(Signed) A. W. Schoenleber

AWS/ECB

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