CLEARING INDUSTRIAL CLINIC

Clinical Laboratory

5548 WEST SIXTY-FIFTH STREET
CHICAGO, ILLINOIS 60638

STATE REG. NO 328 PHONE 767-6600

6/31 19 84

NAME [redacted] (AMER CYAN)

LABORATORY REPORT

CONFIDENTIAL INFORMATION REDACTED

URINALYSIS:

SPECIFIC GRAVITY _____
REACTION _____
COLOR _____
SUGAR _____
ALBUMIN _____
ACETONE _____
OCCULT BLOOD _____

MICRO:

W. B. C. _____
R. B. C. _____
CASTS _____
CRYSTALS _____
EPITH. CELLS _____
OTHERS _____

PREGNANCY TEST: _____

HEMATOLOGY:

HEMOGLOBIN _____ R. B. C. _____ W. B. C. _____
HEMATOCRIT _____ PLATELET COUNT _____

DIFFERENTIAL COUNT:

NEUTROPHILS _____ LYMPHOCYTES _____
BASOPHILS _____ EOSINOPHILS _____
MONOCYTES _____ OTHERS _____

CELL MORPHOLOGY _____
BLOOD TYPE _____ Rh _____
OTHER _____
SEDIMENTATION RATE: _____ MM IN 60 MINUTES

BLOOD CHEMISTRY:

SUGAR FASTING _____ Mg/100 cc BLOOD
2 HR. P.P. _____ Mg/100 cc BLOOD
CHOLESTEROL _____ Mg/100 cc BLOOD
BUN _____ Mg/100 cc BLOOD
URIC ACID _____
OTHER _____

SMEARS:

_____

_____

SEROLOGY:

MONO TEST _____
RA LATEX _____

FEP 423 (0-80 mg/dl)

LEAD ANALYSIS OF BLOOD: 53 (0-50 mcg/100gm)

TECHNICIAN R.M.T.

ROBERT E. BOYD, M.D.
5548 W. 65th ST.
CHICAGO, ILL. 60638
MEDICAL DIRECTOR M.D.

CYWI 3-001179

N14517

CLEARING INDUSTRIAL CLINIC

Clinical Laboratory

5548 WEST SIXTY-FIFTH STREET
CHICAGO, ILLINOIS 60638

STATE REG. NO 328 PHONE 767-6600

8-31 19 84

NAME [redacted] (American Cyan)

LABORATORY REPORT

CONFIDENTIAL INFORMATION REDACTED

URINALYSIS:

SPECIFIC GRAVITY 1.022
REACTION 6
COLOR Straw
SUGAR 0
ALBUMIN 0
ACETONE 0
OCCULT BLOOD 0

MICRO:

W. B. C. 2-3
R. B. C. 0
CASTS 0
CRYSTALS 0
EPITH. CELLS 3-5
OTHERS

PREGNANCY TEST:

HEMATOLOGY:

HEMOGLOBIN 14.4 (14-18) R. B. C. 4.6 W. B. C. 9,600
HEMATOCRIT 44 (40-54) PLATELET COUNT

DIFFERENTIAL COUNT:

NEUTROPHILS 53 LYMPHOCYTES 44
BASOPHILS 0 EOSINOPHILS 0
MONOCYTES 1 OTHERS Band 2

CELL MORPHOLOGY
BLOOD TYPE Rh
OTHER
SEDIMENTATION RATE: MM IN 60 MINUTES

BLOOD CHEMISTRY:

SUGAR FASTING Mg/100 cc BLOOD 2 HR. P.P. Mg/100 cc BLOOD
CHOLESTEROL Mg/100 cc BLOOD BUN Mg/100 cc BLOOD
URIC ACID OTHER

SMEARS:

SEROLOGY:

MONO TEST
RA LATEX

LEAD ANALYSIS OF URINE:

R.M.T.
TECHNICIAN

LEAD ANALYSIS OF BLOOD:

ROBERT E. BOYD, M.D.
5548 W. 65th ST.
CHICAGO, ILL. 60638
M.D.
MEDICAL DIRECTOR

CYWI 3-001180

CLEARING INDUSTRIAL CLINIC

EMPLOYMENT HEALTH QUESTIONNAIRE

NAME: [redacted] DATE: 8-31-84

COMPANY: Cimerron Gyp. AGE: 40 HEIGHT: 66" WEIGHT: 165

HISTORY OF PREVIOUS LUNG DISEASES AND YEAR:

PNEUMONIA: No ASTHMA: yes (July 1984)

CHRONIC BRONCHITIS: No EMPHYSEMA: No

ALLERGIES: No TUBERCULOSIS: No

PNEUMOCONIOSES (Silicosis, Asbestosis, Coal-Miners Disease, Etc.): NC

HISTORY OF HEART DISEASE: No

SMOKING HISTORY:

DO YOU SMOKE CIGARETTES NOW? YES ____ NO ✓

IF YES, HOW MANY PER DAY? ____ WHEN DID YOU START (AGE)? ____

IF NO, DID YOU EVER SMOKE CIGARETTES? YES ____ NO ✓

IF YES, WHEN DID YOU START (AGE)? ____ WHEN DID YOU STOP (AGE)? ____

HOW MANY PER DAY? ____

DO YOU SMOKE CIGARS? YES ____ NO ✓

DO YOU SMOKE A PIPE? YES ____ NO ✓

DO YOU HAVE ANY OF THE FOLLOWING SYMPTOMS: IF YES, EXPLAIN.

SHORTNESS OF BREATH (DSYPNEA): No

AFTER EXERTION: No

COUGH: No DRY: No EXPECTORATION: No

BLOOD SPITTING: No

PAIN OR DISCOMFORT IN CHEST: No

LOSS OF APPETITE No LOSS OF WEIGHT: No

HAVE YOU EVER WORKED:

AS A HARD ROCK MINER?	YES ___	NO ✓	FROM ___	TO ___
WITH ASBESTOS?	YES ___	NO ✓	FROM ___	TO ___
WITH DIATOMACEOUS EARTH?	YES ___	NO ✓	FROM ___	TO ___
AS A COAL MINER?	YES ___	NO ✓	FROM ___	TO ___
IN A JOB THAT REQUIRED AN X-RAY FILM BADGE?	YES ___	NO ✓	FROM ___	TO ___
AS A WELDER?	YES ___	NO ✓	FROM ___	TO ___
IN A TEXTILE MILL?	YES ___	NO ✓	FROM ___	TO ___
WITH TALC?	YES ___	NO ✓	FROM ___	TO ___
IN ANY OTHER DUSTY JOB?	YES ___	NO ✓	FROM ___	TO ___
WITH EXPOSURE TO EXCESSIVE NOISE?	YES ___	NO ✓	FROM ___	TO ___

SIGNED [redacted]

INTERVIEWER

EMPLOYEE

CONFIDENTIAL INFORMATION REDACTED

CYWI 3-001181

METPATH

CENTRAL LABORATORY FACILITY

DES PLAINES, ILLINOIS 60018

JOSEPH E. O'BRIEN, M.D.
ROBERT P. DECRESCE, M.D.
DENSIL A. BROWN, DIS

[redacted]	C0728	NOT GIVEN	09/01/84	09/02/84
PATIENT		DATE DRAWN	DATE REC'D	
M / 38 / 74	CLEARING INDUSTRIAL CLINI			31851 3ND
SEX / AGE				ACCT NO
AMERCYAN	5548 W. 65TH CHICAGO IL 60638			- 170247
				SPEC NO

TEST NAME	RESULT	UNITS	REFERENCE RANGE
**			
TEST RESULTS OUTSIDE ESTABLISHED REFERENCE RANGE			
CREATININE, SERUM	1.50	MG/DL	.80-1.50
BUN, SERUM	31.0	MG/DL	9.00-23.0

CONFIDENTIAL INFORMATION REDACTED

CYWI 3-001182

Code 1: If whole blood is received by the lab or if the gel barrier is defective for any reason, false elevation of LDH, Potassium, Iron, and Phosphate as well as a false decrease in Glucose may be seen.

Code 2: Bacterial contamination or delayed separation of serum from cells may falsely decrease Glucose and may falsely elevate the Potassium, LDH, Phosphate, SGOT, and SGPT.

Code 3: Sedimentation Rate results may be affected if the time between specimen drawing and testing is prolonged. Please note the date drawn and date received.

Code 4: Platelet results may be affected if the time between specimen drawing and testing is prolonged. Please note the date drawn and date received.

Code 5: Prothrombin Time results may be affected if the time between specimen drawing and testing is prolonged. Please note the date drawn and date received.

Code 6: Activated Partial Thromboplastin Time results may be affected if the time between specimen drawing and testing is prolonged. Please note the date drawn and date received.

Code 7: Hemolyzed serum may falsely elevate the Potassium, Iron, SGOT, SGPT, LDH, and Phosphate.

Code 8: Lipemic serum may falsely elevate the Chloride, Alkaline Phosphatase, SGOT, SGPT, Calcium, Total Protein, and Creatinine and may falsely lower the Total Bilirubin.

Code 9: The specimen was Lipemic. Such specimens are unsatisfactory for analysis on our multichannel analyzer. Manual procedures were substituted for those assays on which valid results could be obtained.

Code 10: Plasma may adversely affect the following Chem-Screen tests—Calcium, Alkaline Phosphatase, LDH, Sodium Magnesium, and Potassium.

Code 11: One or more of the specimens submitted was not properly identified. To assure the integrity of the specimen identity, it is important that the patient name or ID code placed on the requisition also be placed on every specimen submitted with the requisition.

Code 12: Incorrect specimen sent. EDTA plasma is the only acceptable specimen for CEA Roche testing. Any other sample, including serum and other anticoagulants, may cause falsely elevated results.

Code 13: Incorrect specimen received. Freezing destroys the seal in the barrier tube. Upon defrosting, Hemoglobin and other cellular materials are released into the serum, invalidating the specimen. Please submit another specimen by centrifuging and pouring off the serum into a plastic tube, which can then be frozen.

Code 15: Specimens submitted for L.E. preparations in barrier tubes are unsatisfactory for testing. Please submit a plain red-top tube containing clotted blood for L.E. tests.