PLAINTIFF'S EXHIBIT
DUP-453

PD-2

DUPONT
ESTABLISHED 1802

E. I. DU PONT DE NEMOURS & COMPANY
INCORPORATED
WILMINGTON, DELAWARE

PETROCHEMICALS DEPARTMENT

cc: E. B. Yelton
E. F. Ruppe
G. F. Curtin
Division Heads
Directors of Manufacturing
Director, International Ops.
Production Managers
Directors of Marketing
National Sales Managers
Technical Director
Technical Managers
Manager, Domestic Sales
W. A. Bethem
J. R. Cooper

PERSONAL AND CONFIDENTIAL

May 8, 1981

ALL EMPLOYMENT LOCATIONS

Pls. discuss our action plan. JVW

ASBESTOS SCREENING PROGRAM
PARTICIPATION OF PENSIONERS

As you have been informed previously, Company sites have participated in a Medical Division program to increase our ability to detect asbestos-related lung abnormalities in our employees at an early stage. A special review of x-rays of employees over forty with ten years' service and probable job-related exposure to asbestos has been completed. Other employees are receiving a comparable critical review at the time of their periodic physical examination.

It has now been decided by Corporate management that all pensioners who believe they may have been exposed to asbestos during their Du Pont employment should be given an opportunity to participate in the x-ray screening program. The plan for management of the program is given below.

The Screening Program

The screening program is to be managed by each site for its own pensioners. Your site is responsible for pensioners for whom your site was the final employment point or pensioners from former Du Pont sites for whom you have administrative responsibility.

The program will parallel that for employees. Pensioners who wish to participate will respond to a letter prepared by the site. The site, in turn, will arrange for individual consultation and a chest x-ray, which will be read by a board-certified or qualified radiologist.

DUP 0810421

No attempt should be made by the site to dissuade any pensioner from participating in the screening; anyone who wishes to participate should be accommodated, and arrangements made for an x-ray. However, if a person is in doubt about his exposure and it appears from a discussion of his work history that he has had no possibility of asbestos exposure, the advice that he need not participate may be given and recorded. If there is any doubt concerning potential for exposure, he should be encouraged to participate. A record should be kept of all contacts from pensioners and their disposition. A suggested format for recording pensioner contacts is attached.

The site may elect to carry out x-ray screening at its own site or may arrange to refer the pensioner to a nearby clinic, at the plant's expense. Where the pensioner resides at an inconvenient distance from the site, Wilmington Medical will assist in identifying a conveniently situated radiologist to whom the site physician can refer the pensioner. Pensioner travel expense for the initial screen should not be paid.

All pensioners participating in the program should be advised of the x-ray screening results whether or not an asbestos-related abnormality is detected. Pensioners who have no detectable abnormality but have been exposed to asbestos should be advised to refrain from smoking and to be followed with annual chest radiographs by their personal physicians. If the x-ray detects an abnormality, a work history should be obtained and if it appears that the abnormality may be related to Du Pont employment, the same procedure for pulmonary consultation should be followed as with employees. Disposition and possible compensation for disability should follow standard departmental procedures. Of course, if an abnormality but no work relatedness is found, the pensioner also should be advised of the abnormality and urged to consult with his personal physician at his own expense.

Medical Division will separately contact site physicians concerning this program. A copy of their letter, to be mailed May 11, is attached. Because of the importance of this program, we ask that you discuss with your physician each aspect of this program and address medically related questions to the Medical Division, Wilmington. The initial screen of participating pensioners should be completed as soon as possible.

DUP 0810422

Communication

All pensioners should be advised of the screening program. A suggested letter, background information, and response form for your use in informing pensioners is attached. It is recommended that a stamped return-address envelope be enclosed with the letter. Address lists and mailing labels for the pensioners administered by your site are provided in this package to assist with the mailing of letters.

Announcement of the x-ray screening program for pensioners should be made no earlier than May 27 to supervision and employees. Letters to pensioners should not be mailed before this date.

Since pensioner involvement will heighten awareness of the screening program, a general announcement to employees at your site should be made if you have not already done so. Attached is a suggested announcement to employees and "Questions and Answers" which you may want to use in whole or part to inform your supervision and employees of this program. In determining the nature and extent of employee communications, you should consider the highly sensitive, personal, and emotional nature of this matter. You should also consider that union organizers and others may try to make an issue of Company practices concerning asbestos handling and may use the OSHA standard on access to medical records as a vehicle to accomplish this.

Also attached is a copy of the Corporate media standby statement on the pensioner screening program and a draft media statement for your site. Media questions about the Corporate program should be referred to George K. Palmer (302) 774-8294 of the Corporate Public Affairs staff.

Sites may modify material in this package to fit their circumstances, but any change of substance should be reviewed with the writer before release. Questions from union representatives concerning this program should be referred to W. A. Bethem or T. W. Bruce, Industrial Relations Section. Other questions regarding this program or departmental procedures for implementation should be referred to the writer or B. R. Bundens (4-0745) Personnel and Salary Section.

GC Steele

G. C. Steele, Manager
Personnel and Salary

GCS:MAP
Enclosures

DUP 0810423

SUGGESTED PENSIONER COMMUNICATIONS

DUP 0810424

SUGGESTED LETTER FOR PENSIONERS

Dear Pensioner: (or use pensioner's name)

As you know, over the past several years increased medical knowledge has led to heightened concern about possible health problems for people who have worked with asbestos. Initially, it was thought that only those people who worked in asbestos-related industries might be affected, but it is now known that some workers in our industry have been affected as well.

For that reason, we began a special x-ray screening program a few months ago for current Du Pont employees who may have been exposed to asbestos dust, particularly in jobs where work with asbestos insulation was involved. Other employees are also receiving review of the chest x-rays at the time of their regular physical examination. The purpose of this program is to determine if there are any lung abnormalities that may be related to asbestos exposure.

We are now extending this program to all pensioners. I believe the screening program is in keeping with our long-standing concern for the health and well-being of our employees and pensioners, even if only very few may have been affected by exposure to asbestos.

If you believe you were exposed to asbestos during your Du Pont employment and wish to participate in the screening program, or if you have any questions, I encourage you to use the enclosed check-sheet

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to contact us. A return-addressed envelope is enclosed for your use. We, in turn, will contact you directly to answer your questions or advise you of the appropriate arrangements if you decide to participate. The enclosed questions and answers about the screening program may aid you in your decision. Our experience with the employee program indicates that jobs in the mechanical ~~crafts such as insulators, laggers, pipe wrappers, pipe coverers, millwrights, etc.,~~ ORGANIZATION had the highest potential for exposure to asbestos.

Even if you decide not to participate, please take time to complete the enclosed form and return it to us in the self-addressed envelope.

Sincerely,

Site Manager

Enclosure

DUP 0810426

ASBESTOS SCREENING PROGRAM

The following asbestos questions and answers about the asbestos screening program may be helpful to you.

1. Q Why was this program undertaken?

   A To take advantage of improved techniques to identify lung abnormalities which may have been undetected by the traditional evaluation methods. The program was extended to pensioners since some of them also may have been exposed to asbestos during their Du Pont careers and may have developed pulmonary abnormalities.

2. Q What will happen to those pensioners who elect to participate in the program?

   A They will be scheduled for an x-ray at a Du Pont site or at the office of a private physician. Since most pensioners live within a reasonable distance of Du Pont plant sites, most screening will probably be done at the sites which are adequately equipped to support the program. X-rays will be read by a board-qualified radiologist to see if an asbestos-related disease or condition is indicated.

3. Q Will Du Pont pay for these x-rays by private physicians?

   A Yes. Du Pont will pay for all x-rays authorized as a part of this program.

4. Q Do you anticipate finding many cases of undiscovered lung disease or asbestosis?

   A We believe there may be some previously undiagnosed cases of lung abnormalities, some of which may be asbestos-related. We don't, however, anticipate finding a large number of such cases.

5. Q What medical treatment will be prescribed?

   A Generally, no medical treatment is indicated for asbestosis or asbestos-related abnormalities but all work-related cases will be referred to a pulmonary specialist at Company expense for evaluation and consultation. It is also strongly advised that smokers with an asbestos-related abnormality or asbestosis should stop smoking immediately.

DUP 0810427

6. Q Will a person who has an illness be eligible for Worker's Compensation or other benefits?

   A If an illness or impairment is detected and it is determined that it resulted from exposure at Du Pont, the Company will accept responsibility for providing medical treatment and other benefits which are appropriate.

7. Q How many pensioners will be included in the program?

   A All of our present pensioner population, about 30,000 men and women, will be advised of our screening program. We have ~~about~~ 133 pensioners at our site. Anyone who wishes to participate will be accommodated. However, most pensioners were not exposed to asbestos while employed by Du Pont.

DUP 0810428

ASBESTOS SCREENING PROGRAM

YOUR NAME _____

ADDRESS _____

_____

_____

TELEPHONE NUMBER _____

_____ I WOULD LIKE TO PARTICIPATE IN THE PROGRAM. PLEASE CONTACT ME TO MAKE ARRANGEMENTS.

_____ I AM NOT CERTAIN WHETHER I SHOULD PARTICIPATE IN THE SCREENING PROGRAM. PLEASE HAVE SOMEONE CONTACT ME.

_____ I AM NOT INTERESTED IN PARTICIPATING IN THE PROGRAM.

PLEASE RETURN THE COMPLETED FORM IN THE ENCLOSED SELF-ADDRESSED ENVELOPE.

DUP 0810429

SUGGESTED FORMAT

FOR RECORDING

PENSIONER CONTACTS

DUP 0810430

Faisel

PENSIONER NAME _____
ADDRESS _____
_____
PHONE _____

INITIAL PENSIONER CONTACT BY: DATE:

_____	PHONE	_____
_____	LETTER	_____
_____	VISIT	_____
_____	RESPONSE FORM	_____

_____ INTERESTED IN PARTICIPATING IN PROGRAM.
_____ NOT INTERESTED IN PARTICIPATING IN PROGRAM
_____ NOT CERTAIN ABOUT PARTICIPATING IN PROGRAM. CONTACT NEEDED.

PRINCIPAL DU PONT JOB _____
PRINCIPAL DU PONT EMPLOYMENT SITE _____
MOST CONVENIENT LOCATION FOR PENSIONER TO GET X-RAY:

_____
DU PONT SITE

_____
NEAREST MAJOR CITY

HAS PENSIONER HAD A CHEST X-RAY:

IN THE PAST TWELVE MONTHS?	_____ YES	_____ NO
AT A DU PONT SITE	_____ YES	_____ NO
BY A PRIVATE PHYSICIAN	_____ YES	_____ NO

IF SO, CAN IT BE EXAMINED BY A DU PONT APPOINTED RADIOLOGIST?

_____ YES _____ NO

PENSIONER'S PHYSICIAN'S NAME AND ADDRESS:

_____
_____
_____

PENSIONER COMMENTS: _____
_____
_____

PROGRAM DISPOSITION: _____
_____
_____

FOLLOWUP CONTACT BY _____ ON _____.

DUP 0810431

SUGGESTED

EMPLOYEE ANNOUNCEMENT

DUP 0810432

SUGGESTED COMMUNICATION TO SUPERVISION AND EMPLOYEES

A few months ago, the Medical Division initiated a special program to review x-rays of employees over forty with ten years or more of Du Pont employment, who have possibly had exposure to asbestos, primarily through handling of insulation. The objective of this program is to determine if there are any early lung abnormalities that may be related to asbestos exposure at Du Pont. Other employees' x-rays are being reviewed at the time of their regular physical examination.

This x-ray screening program is now being extended to pensioners. As is our policy with employees, pensioners will be informed immediately of any abnormality observed.

Physicians and radiologists traditionally have not specifically examined x-rays for minute, early signs of thickening of the lung lining (pleural thickening). Based on developments in and outside the Company during the past decade, medical knowledge and understanding of asbestos-related lung abnormalities have increased dramatically, making early identification of these abnormalities more feasible. Therefore, the review program is being conducted in the light of this increased knowledge and understanding to identify and follow up on any abnormalities which may have gone undetected by traditional methods.

The Medical Division began a program last year to better train Company physicians in early detection procedures. That training is

DUP 0810433

now completed, and the physicians are reviewing x-rays in conjunction with our consulting radiologists. Du Pont believes that it is the first company in the chemical industry to initiate such an extensive program.

We strongly stress that an early positive reading on an x-ray does not necessarily mean that an employee or pensioner has, or will develop, asbestosis. No medical treatment is required for asbestos-related abnormalities where no disease is present but all work-related cases will be referred to a pulmonary specialist at Company expense for evaluation and consultation.

We believe that our current procedures for handling asbestos insulation ensure a level of exposure well within acceptable limits. Therefore, no changes in handling procedures are anticipated. Any cases of asbestos-related abnormalities detected now are the result of exposure many years ago, at Du Pont or in previous employment, at a time when low levels of exposure to asbestos were not known to be potentially harmful. The installation of asbestos insulation on this site was discontinued by _____.

ADC

DUP 0810434

MEDICAL DIVISION LETTER

TO

SITE PHYSICIANS

DUP 0810435

ER-8084 REV 6-79



E. I. DU PONT DE NEMOURS & COMPANY
INCORPORATED
WILMINGTON, DELAWARE 19898

EMPLOYEE RELATIONS DEPARTMENT
MEDICAL DIVISION

May 11, 1981

COMPANY PHYSICIANS

ASBESTOS ABNORMALITY DETECTION PROGRAM FOR PENSIONERS

Our present pensioner population consists of some 30,000 men and women, some of whom may have been exposed to asbestos during their active working years and may have developed pulmonary abnormalities.

A program to inform pensioners and to detect and evaluate pulmonary abnormalities will be implemented through the employment sites. The format will be similar to the detection program presently in effect for active employees. The program will be implemented in four phases:

- o Information
- o Detection
- o Review of Work History
- o Evaluation

The information phase will be accomplished by a letter to all pensioners describing our program and suggesting that they contact the appropriate employment site. The letter provides detailed information and instructions for making the contact. A copy of a sample letter is attached.

The second phase will involve the detection of possible abnormalities by a radiological chest exam. Provisions will be made for alternative sources of radiologic evaluation if employment sites are not available nor practicable. All radiographs will be interpreted by a board certified or qualified radiologist.

Phase three involves an examination of the Du Pont work history for those cases where abnormalities consistent with asbestos are detected. If there is significant exposure, further evaluation will be provided by Du Pont.

Pensioners will be informed of any abnormality detected whether or not asbestos related. Pensioners who have no detectable abnormality, but have been exposed to asbestos, should be advised to refrain from smoking and to be followed with annual chest radiographs by their personal physicians.

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The evaluation phase will be provided by a pulmonary specialist if radiologic abnormalities compatable with asbestos exposure are detected and there had been significant Du Pont exposure. Abnormalities will be classified according to the Physician's Guidelines, Section T&U:

- o Benign asymptomatic
- o Benign symptomatic
- o Malignant illness

Pensioners with detected abnormalities will be managed as if active employees.

Pensioners who are participating in an annual physical examination program at a plant site should not be scheduled for additional radiological evaluations. The chest x-ray done as part of an annual examination is sufficient to screen for a possible asbestos abnormality.

Questions pertaining to this program should be addressed to your site management or if of a medical nature to the Medical Division, Wilmington, 302-774-5226.

MEDICAL DIVISION

Bruce W. Karrh, M.D.
Medical Director

DUP 0810437

QUESTIONS AND ANSWERS

FOR SUPERVISION

DUP 0810438

QUESTIONS AND ANSWERS

The following questions and answers may be helpful to supervision in responding to employee or pensioner inquiries concerning the asbestos screening program.

1. Q Are all Du Pont sites involved in this program?

   A Yes, but to varying degrees depending on the extent of use of asbestos-containing materials.

2. Q Why was this program undertaken?

   A To take advantage of improved techniques to identify lung abnormalities which may have been undetected by the traditional evaluation methods. The program was extended to pensioners since some of them also may have been exposed to asbestos during their Du Pont careers and may have developed pulmonary abnormalities.

3. Q Do you anticipate finding many cases of undiscovered lung disease or asbestosis?

   A We believe there may be some previously undiagnosed cases of lung abnormalities, some of which may be asbestos-related. We don't, however, anticipate finding a large number of such cases.

4. Q What is asbestosis?

   A Asbestosis is a condition of the lungs caused by exposure to asbestos dust. The condition involves structural changes that can be seen on chest x-ray films as well as changes such as impaired pulmonary (lung) function, cough, and labored breathing. Asbestosis is frequently a progressive illness.

5. Q What medical treatment will be prescribed?

   A Generally, no medical treatment is indicated for asbestosis or asbestos-related abnormalities but all work-related cases will be referred to a pulmonary specialist at Company expense for evaluation and consultation. It is also strongly advised that smokers with an asbestos-related abnormality or asbestosis should stop smoking immediately.

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6. Q What is the probability of a lung abnormality developing into asbestosis?

   A This is difficult to answer. Assuming that the detected lung abnormality is due to asbestos exposure, we can state the following facts:

   - o Present medical knowledge considers such an abnormality to be irreversible, but not necessarily one that will develop into asbestosis.

   - o Development of and the progression of asbestos-related abnormalities are dependent upon such factors as dose, age, and life style. For example, smoking increases the possibility of asbestos-related disease, particularly cancer.

7. Q What is the difference between asbestosis and cancer?

   A Simply stated, asbestosis does not involve a cancerous condition. A rare form of cancer called mesothelioma is found in some persons who have been exposed to asbestos. Cancer of the lung is far more frequent among smokers exposed to asbestos than among non-smokers so exposed.

8. Q Why does it take 15 to 20 years for an abnormality to develop?

   A The precise answer to this question is unknown at present. However, the latency seems to be related to the amount of exposure and to the rate of migration of asbestos fibers through lung tissue.

9. Q Do our current asbestos work practices prevent the development of any lung abnormalities?

   A Yes, we are confident following present work practices will protect any worker from damaging exposures to asbestos. However, because of the latency period, previous exposure may yet cause a future abnormality to become evident.

10. Q Why are new x-rays being taken in the case of some employees?

    A The early abnormalities for which our physicians and radiologists are searching are more readily detectable only if a high quality x-ray film is obtained. In certain cases, we have found that while our x-rays are perfectly acceptable for most diagnostic purposes, some are of insufficient quality for detecting early asbestos-related changes.

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11. Q Will a person who has an illness be eligible for Workers' Compensation or other benefits?

A If any illness or impairment develops and it is determined that it resulted from exposure at Du Pont, the Company will accept responsibility for appropriate related medical costs, make an Workers' Compensation settlement offer, if any is appropriate, and assist the person or his family in obtaining other benefits to which they may be entitled.

12. Q I retired from the _____ site, but now reside in a different state. Which state's compensation laws apply?

A Compensation laws vary from state to state and claims, therefore, will be handled on a case by case basis. However, claims are usually filed in the state where last employed.

13. Q How many pensioners will be included in the program?

A All of our present pensioner population, about 30,000 men and women, will be advised of our screening program. We have about _____ pensioners at our site. Anyone who wishes to participate will be accommodated. However, most pensioners were not exposed to asbestos while employed by Du Pont.

14. Q Why was no attempt made to single out for special screening pensioners who might have been exposed to higher levels of asbestos?

A Contrary to the case with current employees, work histories of some pensioners are sketchy, and it was felt any prescreening based on records of job assignments might overlook an exposed individual. Consequently, it was decided to give every pensioner an opportunity to participate.

15. Q What will happen to those pensioners who are believed to have been exposed to asbestos?

A They will be scheduled for an x-ray at a Du Pont site or at the office of a private physician. Since most pensioners live within a reasonable distance of Du Pont plant sites, most screening will probably be done at the sites which are adequately equipped to support the program. X-rays will be read by a board-qualified radiologist to see if an asbestos-related disease or condition is indicated.

DUP 0810441

16. Q Will Du Pont pay for these x-rays by private physicians?

A Yes. Du Pont will pay for all x-rays authorized as a part of this program.

17. Q Will travel expenses be paid for pensioners obtaining x-rays?

A No.

18. Q What action will Management take if an abnormality is detected but there is no Du Pont work history involving asbestos?

A All employees and pensioners participating in the program will be advised of the x-ray screening results. When an abnormality but no work relatedness is found, the individual will be urged to refrain from smoking and to consult with his personal physician.

19. Q May I participate in the program if I didn't work with asbestos at Du Pont but did work with asbestos elsewhere?

A All pensioners are eligible to participate in the screening program.

20. Q Is the program being extended to former employees who are not pensioners?

A Not at this time. However, concerns of former Du Pont employees contacting the Company will be reviewed on a case by case basis and x-rays authorized if appropriate.

21. Q Is this x-ray screening program part of a physical examination program for pensioners?

A No. Physical examinations have been made available by Du Pont to pensioners only at sites where medical facilities have the capacity for the additional examinations. This practice will be continued. The x-ray screening program is not a substitute for a pensioner's program of general medical surveillance by his personal physician (or the physical examinations that have been made available to pensioners at our site).

22. Q Will any detected pensioner illness be included in Corporate safety statistics?

A No.

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23. Q Have the Steelworkers or asbestos suits prompted Du Pont's program?

A No.

24. Q Has the discovery of asbestos-related medical cases at Chambers Works and Repauno had a bearing on this program?

A Yes, we learned from that experience; however, that was not the sole consideration in establishing the program.

25. Q Does Du Pont plan to release the results of this review?

A The purpose of this detection program is to identify existing abnormalities and ensure that our physicians are highly sensitive to them in the future. This detection program is not a controlled epidemiology study and consequently there are no plans to publish any findings. Affected employees or pensioners, of course, will be promptly advised by our physician.

DUP 0810443

STANDBY PRESS RELEASE

SITE

DUP 0810444

SITE MEDIA STANDBY STATEMENT
ASBESTOS SCREENING PROGRAM

The Medical Division of the _____plant is extending its current review of the medical histories of employees over 40 who may have been exposed to asbestos dust to include pensioners who may have worked with asbestos in insulating materials or in other manufacturing operations. The purpose of the review is to detect possible early signs of lung abnormalities.

These early signs, generally a thickening of lung tissues, may not normally be diagnosed in standard reading of x-rays by physicians and radiologists. All chest x-rays of employees in the group and pensioners will be reviewed by a consulting radiologist and, if the x-rays are inconclusive, additional x-rays will be taken. It should be stressed that an early positive reading on an x-ray does not necessarily mean that an employee has, or will develop asbestosis.

As is our medical policy, any employees or pensioners affected will be advised immediately and privately by his site physician. Any such work-related cases will be referred to a pulmonary specialist for evaluation, although no immediate medical treatment is required.

If new cases of early asbestos-related lung abnormalities are found, they would represent the result of exposure many years ago, at Du Pont or in previous employment, when the potential danger of handling asbestos insulation was not fully recognized. The use of new asbestos insulation on this site was discontinued in _____. We are confident that our present handling procedures for asbestos remaining on the site ensure an exposure level that is well within acceptable limits.

DUP 0810445

STANDBY PRESS RELEASE

CORPORATE

DUP 0810446

CORPORATE MEDIA STANDBY STATEMENT
ASBESTOS SCREENING PROGRAM

Du Pont Company sites are now including pensioners in their ongoing program to review the medical histories of employees who may have been exposed to asbestos in the workplace.

Last year, the sites began a comprehensive review of medical histories of employees over forty who may have been exposed to asbestos dust through prior work with insulation material or in other manufacturing operations. Other employees are receiving comparable critical review at the time of their regular periodic physical examination. The purpose of the company-wide review is to detect possible early signs of asbestos-related lung abnormalities. It should be strongly stressed that an early positive reading on an x-ray does not necessarily mean that an employee has, or will develop asbestosis.

These abnormalities, generally a thickening of the lining of the lung, may not have been detected in standard interpretations of x-rays by physicians and radiologists. All chest x-rays of employees in the group are being reviewed by a consulting radiologist and, if the x-rays are inconclusive, additional x-rays will be taken.

Any affected employee or pensioner will be advised immediately and privately by his site physician, as is normal practice. Any such work-related cases will be referred to a pulmonary specialist for evaluation, although no immediate medical treatment is required for these abnormalities.

If new cases of early asbestos-related lung abnormalities are found, they would represent the result of exposure many years ago at Du Pont or in previous employment when the potential danger of handling asbestos insulation was not fully recognized.

The program is believed to be first of its kind in the chemical industry.

DUP 0810447