

INTER-COMPANY CORRESPONDENCE

OAK RIDGE NATIONAL LABORATORY

Operated By

CARBIDE AND CARBON CHEMICALS DIVISION
Union Carbide and Carbon CorporationPost Office Box P
OAK RIDGE, TENN.(INSERT
NAME)

COMPANY _____

LOCATION _____

TO Mr. John C. Gallimore
 LOCATION Building 9202, Y-12
 ATTENTION
 COPY TO

DATE February 17, 1955

ANSWERING LETTER DATE

SUBJECT Pathology Report on Prepared
Slides, Nos. I, V, VI, VIII

Enclosed please find my pathologic report on the prepared slides which you left with me a few days ago. The slides are being returned to you under separate cover. Do not hesitate to let me know if I can be of further assistance.



A. C. Upton, M.D.

ACU:mml
 Enclosure

REPOSITORY MMES/x-10COLLECTION Health Sci Research DivBOX No. 1060 Commerce ParkFOLDER Rm 253

A-00352

Human Studies Project

1147254

- #I. Cloudy swelling of the epithelium of proximal and distal convoluted tubules, debris in the lumen. Hyaline casts in collecting tubules. Precipitated protein in Bowman's space-thrombosis of glomerular capillaries. Acute passive congestion. Autolysis. Diagnosis: Acute nephrosis.
- #V. Cloudy swelling of epithelium of proximal convoluted tubules. Necrosis, brown pigmentation, and atrophy of epithelium of distal convoluted tubules. Numerous hyaline casts, primarily in distal tubules and collecting ducts.
Moderate autolysis
Diagnosis: Acute nephrosis.
- VI. Marked interstitial lymphocytic infiltration. Scarring of occasional glomeruli. Necrosis and atrophy of epithelium of convoluted tubules, which contain pigmented (hemoglobinuric?) casts. Interstitial edema. Slight arteriosclerosis.
Diagnosis: Severe subacute nephrosis.
- VIII. Kidney: Fresh thrombus in a medium-sized vein. Leukocytic infiltration in glomeruli. Occasional hyalized glomeruli. Cloudy swelling of epithelium of proximal convoluted tubules. Few hyaline casts in collecting ducts. Interstitial edema in pyramids. Autolysis.
Liver: Slight periportal fibrosis and leukocytic infiltration (many eosinophiles). Fatty infiltration and brown pigmentation of liver cells. Periportal lipid-laden phagocytes.
Spleen: Sclerosis and inflammation of central arterioles. Clusters of lipid-filled phagocytes. Lymphoid atrophy.
Diagnosis: Healing chronic periarteritis nodosa (?). Terminal thrombosis of medium-sized renal vein. Chronic ascending cholangitis with early biliary cirrhosis. Lipid granulomata in liver and spleen (mineral oil?).
Fatty degeneration of the liver. (No definite evidence of nephrosis.)