

May 1, 1961

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Mr. D. Rutten
State Compensation Insurance Fund
525 Golden Gate Avenue
San Francisco, California

Re: [REDACTED]

Dear Mr. Rutten:

This is a summary of the information I have on Mr. [REDACTED]
[REDACTED] your case No. 342402.

I first saw Mr. [REDACTED] in August, 1960. A member of the Crocker Laboratory staff heard from Mr. [REDACTED] that he was having trouble with his hands and fingers, and was concerned about the possibility of exposure to radiation in his job in Building 36 on Piedmont Avenue. I ascertained that Mr. [REDACTED] was an employee of the University, and that he was not on the medical program either of the Radiation Laboratory or the Radiation Safety Division of the University; however, because of his concern about radiation, I contacted him and suggested that we discuss it. He complained of numbness and pain in the fingers of both hands, particularly the right hand. He noticed this especially when handling newspapers or when playing the piano. It had progressed somewhat over the previous few months. He had already discussed it with his private physician, and, feeling that he was getting no results, had contacted the University of California Medical Center in San Francisco. He was planning another appointment there. When I saw him there was a slight diminution in sensation to touch and pinprick, which was diffuse in both hands without specific localization. The diminution was most noticeable over the thick-skinned pads of the fingers. There was slight suggestion of astereognosis on handling small objects with the hands. There was mild tenderness over the spine of the third thoracic vertebra on palpation. The patient gave a history of some stiffness of his neck and upper back, and indicated that flexing, extending, or twisting his back often gave pain which radiated down the arms, particularly the right arm, and to some extent duplicated the chief complaint of trouble in the hands and fingers. Hyperextension of the neck and back by the patient on the day he was seen here again gave rise to the discomfort in the arm and hand. The skin of the hands was somewhat thickened; this was not inconsistent with the normal finding in

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people doing his kind of work. There were no other significant findings with respect to the hands. I discussed the areas of the building on Piedmont Avenue in which the patient worked and the type of work with him in detail. He indicated that he used Oakite, Pinoleum, and the usual cleaning materials. On the history, physical findings, and my own knowledge of the radiation levels and types of radioactivity in the buildings on Piedmont Avenue, I concluded that there was no significant exposure to radiation; that it is unlikely that any of the other agents used in his work was causing the trouble with his hands; and that the most likely diagnosis was radiculitis on the basis of osteoarthritis of the cervical and thoracic spine. Feeling that further work-up regarding the diagnosis was desirable, I encouraged him to continue with his appointments at San Francisco Medical Center. During the ensuing three months we had some correspondence and made some phone calls about his appointments there. I have not received a final report from the Medical Center. In order to have a further check on the occupational exposures, I requested a check on his working conditions by the Division of Environmental Health and Safety; a copy of their report by Mr. Schmelzer is enclosed. I explained our findings to Mr. [REDACTED]

Very truly yours,

Howard G. Parker, M.D.

Enclosure (1)
HGP/mcw

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