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STAFF SURGEON - HQS JOINT TASK FORCE SEVEN
 1958
 DOCUMENTARY REPORT
 ON
 JAPANESE INTERNATIONAL GEOPHYSICAL YEAR SHIPS
 TAKUJO MARU and SATUMA MARU

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TAKUTO MARU and SATUMA MARU

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DOCUMENTARY REPORT
ON
JAPANESE INTERNATIONAL GEOPHYSICAL YEAR SHIPS
TAKUYO MARU and SATUMA MARU

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DISCUSSION

In deciding upon the format for this report, the team felt that in view of the implications other than purely technical involved in our mission, a detailed, narrative type report would best meet the needs of all concerned persons and agencies. By providing both technical information and a description of our relationships with the government representatives and individuals concerned, we feel that much is gained in our attempt to record this entire matter in its proper light.

All members of the team completed this rather sensitive mission with a feeling not only of satisfaction resulting from the technical outcome, but very definitely with a feeling of personal gratification resulting from the extremely cordial relationships with the Japanese and our host officials of the local Australian Territorial Administration.

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CHAPTER I

SUMMARY AND CONCLUSIONS

For the purposes of this report, the summary and conclusions are collected here. Detailed calculations and other data utilized in arriving at these conclusions may be found in the individual chapters.

1. The Japanese data showed that their highest dose-rate reading was only fifteen times their background readings as recorded during the early part of their voyage.

2. The relatively low cumulative gamma readings recorded on the SATMA dosimeter do not necessarily indicate a true dose. It is entirely probable that radiation leakage of the instrument accounted for a large portion of the recorded dose. If accepted as real, it indicates a total dose of 40 milliroentgens between the dates July 8-19.

3. The radiation dose rates on both the TAKUYO and SATMA at the time of monitoring were found to be substantially identical. The decontamination measures carried out on the TAKUYO were effective in reducing the radiation level to essentially background.

4. Japanese data maximizes the whole body gamma dose inasmuch as the scintillation probe was held almost in contact with the deck. Similarly our radiation monitoring data is maximized since the geiger probe was also held in this same position.

5. The maximum radiation dose possible to TAKUYO personnel is calculated to be less than 5 milliroentgens. This assumes continuous exposure for the 15 hours from start of the rain squall to the end

[REDACTED]

of the decontamination, at the highest count rate reported by the Japanese. An additional 2-3 milliroentgen total may have been accepted between this time and our arrival at Rihau (total 300 m

6. The infinite gamma dose, even with no decontamination of the TAKUYO, would have been an insignificant amount. Using Japanese data, the dose calculates to be about 85 milliroentgens.

7. The exposure of the TAKUYO and crew to an insignificant radiation dose resulted from a very local and transitory rain-out not more than 30 minutes duration.

8. The analysis of the drinking water samples collected from the TAKUYO and the SATUMA show no evidence of radioactive contamination.

9. There is no evidence at this time of any detectible effects resulting from exposure to ionising radiation.

10. There have been no cases of radiation sickness on either vessel. Any complaints of illness subsequent to 14 July 1958 were due to other causes; i.e., possible infectious hepatitis or other current illness.

11. There will be no detectible effects, and, in the light of present medical knowledge, no deleterious effects, in fact, result from the minimal radiation exposure experienced, as calculated.

12. There was no detectible evidence of radioactive contamination of personnel at the time of examination.

13. There is no medical indication for restriction of the normal activities of any of the personnel of either vessel.

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CHAPTER II

NARRATIVE SUMMARY

A. SUMMARY OF EVENTS Prior to Departure of Joint Task Force SEVEN Medical Team and Enroute to Rabaul

To our personal knowledge, the first indication regarding the incident of the TAKUYO MARU and SATUMA MARU (also spelled SATSUMA (old spelling)) was a message seen by Colonel Ralph M. Lechance, USAF (MC), Staff Surgeon, JTF-7, on 19 July 1958. This was message date-time group 190204Z, routine precedence, from CINCPAC with information to Commander JTF-7, Eniwetok (see Tab A, Appendix I). This message originated in Tokyo at 10 a.m. on 17 July from MacArthur to State 110 and said, "CNO not advce pass by CNO 171905Z 2 Maritime Safety Board ships now engaged in Pacific survey projects in connection IGE have reported high levels of radioactivity in vicinity of Truk. Ships have informed MSB of 19,000 count per minute on scintillation counter, rain radioactivity of up to 100,000 counts per liter and sea water radioactivity of 247 counts per liter per minute. Vernacular press have given fairly extensive back page play to these reports. MSB officials told Naval Attache that crews on both ships are very worried about radioactivity. MSB, though not too concerned about reported levels of radioactivity, has diverted both ships to Rabaul for fresh water decontamination."

In view of the absence in this advisory of certain important technical information (19,000 counts per minute, etc., of what? Efficiency of the counter, calibration, etc.), certain assumptions were

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made by the Staff Surgeon and certain rough calculations accomplished on the basis of these assumptions and consultation with JTF-7 scientific and technical personnel. In general, these assumptions were:

1. That the 19,000 count per minute quoted referred to counts per cubic meter of air.

2. That the counter efficiency was:

(a) 50%

(b) 20%

On this basis, it was concluded from the calculations that all results were within permissible limits for emergency and continuous consumption for air and water as recommended by the National Committee for Radiation Protection and Measurement (NCRP) and also by the International Commission on Radiation Protection. Commander JTF-7 and the Deputy for Scientific Matters were advised to this effect by the Staff Surgeon. No further action was taken at this time. Messages 180222Z and 180258Z from CINCPAC were checked.

At 0730 hours local time on the morning of 22 July, the Staff Surgeon found on his desk an Operational Immediate message 210612Z from CINCPACFLT with information to Commander JTF-7, originating from ALUSHA TOKYO 210218Z to CNO and information to CINCPACFLT (see Tab B, Appendix I): "My 162206Z. MSB reports some of crew of TAKUYO MARU losing white blood count as a result of radioactive fallout X MSB informally requested aid in flying minimum of 10 and maximum of 51 of crew from Rabaul to Japan for treatment X MSB further requests aid in decontaminating ships X Wooden deck and canvas awnings reported to be

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trouble spots I AMEMB concerned and recommends medical and decontamination assistance I Australian health authorities presently conducting tests on crew at Rabaul."

In view of the content of this message, particularly the references to "MBS reports some of the crew of the TAKUYO MARU losing white blood count as a result of radioactive fallout..." and "...MBS informally requested aid in flying minimum of 10 and maximum of 51 of crew from Rabaul to Japan for treatment..." the Staff Surgeon and Commander Frederick J. Snyder, Joint Task Force SEVEN Operations Officer, were requested by the Commander to draft a message with recommendations to Director of Military Application, U.S. Atomic Energy Commission. Just as this was completed (not sent), Commander JTF-7 received a telecon message from General Alfred B. Starbird, DMA, AEC (see Telecon Item No. 12, Tab C, Appendix I). Message 220030Z from Commander, Joint Task Force SEVEN to DMA/AEC (see Tab F, Appendix I) was dispatched in reply to this query.

At this time, following a conference called by Commander JTF-7, the following were designated as members of the team:

Colonel Ralph M. Lockhouse, USAF (MC)
Chief, Nuclear Medicine, Office of Surgeon General, Hq USAF
Staff Surgeon, Joint Task Force SEVEN

Captain Roscoe E. Coake, U.S. Public Health Service
Health Physicist
Radiological Safety Advisor, Task Group 7.5

Lt Colonel Carl L. Hanson, Jr., USAF (MC)
Nuclear Medicine Officer
Flight Surgeon, Task Group 7.4

The team was alerted for departure to Rabaul pending final advice and clearance from DMA/AEC and State Department. During this period of

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several hours, other advisories from DMA/AEG were received, including message ZL2043Z (see Tab D, Appendix I) and ZL2245Z from USAEC, Washington, D.C. (see Tab E, Appendix I). Other transmissions which followed before our departure are included as Tab H, Appendix I). Medical and radiation survey instruments, equipment and supplies, including anti-malarial prophylactic and aerosol bombs for aircraft, were collected and made ready.

Final clearance from the Australian Government for our entry to Rabaul was received in Operational Immediate message 240043Z (see Tab I, Appendix I) from AEG, Washington, D.C., to Commander JTF-7 which arrived at the Raiwetek Proving Ground at 241515 hours local time. Aircraft operational considerations made it imperative that take-off on the first leg of the flight to Rabaul (Raiwetek to Truk) be not later than noon. Therefore, take-off was set for 250230 hours local time, and, in fact, the aircraft was rolling at this time. (See message 240435Z from Commander JTF-7, Tab J, Appendix I.) Personnel aboard are listed in Tab G, Appendix I. Aircraft 3A-16 #51024 arrived Truk at 250645 hours local time (0749Z). After refueling and breakfast, including one each chloroquin anti-malarial tablet for every member of the party (following greeting at the strip by Mr. Callenore, District Trust Territory Administrator, who offered every convenience and courtesy to our group), we made a JATO-assist take-off for Rabaul at 250905 hours local time (1009Z). Arrival at Rabaul was at 251315 hours local time (1519Z), a total of 12 hours 45 minutes elapsed time.

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B. RABAU

About two hours out of Rabaul our party had been queried as to whether we desired lunch upon arrival. We proceeded, therefore, to the Cosmopolitan Hotel and luncheon following our greeting at the plane by the following individuals:

Mr. John R. Foldi
Australian Territorial Administrator for New Britain Island
Mailing address: Australian Trust Territory
Papua and New Guinea

Charles Haszler, M.D.
Australian Regional Medical Officer, New Guinea Islands
Mailing address: Same as Mr. Foldi's

And others

Mr. Gus Smiles
Reporter for RABAU TIMES
South Pacific Post (Port Moresby) Wire Services

The latter was not a member of the official party, but attached himself immediately—with questions. Following a graciously accepted response of "We are in no position to comment so soon after our arrival", Mr. Smiles permitted us to depart for the hotel. Our group noticed that he had taken pictures as we deplaned.

After lunch and a perusal of Dr. Haszler's file of records which included original interviews (questions and answers) by him and Sub-Inspector Stewart, the team boarded the TAKUYO MARU at the dock. We were accompanied by Mr. Foldi, Dr. Haszler, and two interpreters. One was Mr. Jim Wong, a District employee, and the second was a Japanese employed by the Japanese Salvage Company working in the harbor.

Our party was greeted at the head of the gangplank with formality, but smilingly, by the Captain and his officers, all of whom rendered

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salutes although we were in civilian clothes (as throughout our entire visit). At least two Japanese took pictures from the deck as we boarded—as well as Mr. Gus Smiles from the deck. After a short exchange of greetings and handshakes preferred by our hosts, we were ushered below decks to the TAKUYO wardroom where we were joined shortly by the Captain of the SATUMA and a few of his officers. (See Tab A, Appendix VII for names of specific Japanese personnel contacted. For entire crew lists, see Tab A, Appendix II.)

There followed a relatively short but pleasant period devoted to the amenities during which our hosts served soft beverages (grape juice and orangeade) and peanuts, and during which our language contact was established and somewhat improved as we went along. Captain Mitsuura, who was sitting at Colonel Lechausse's right at the head of his table, led into the purpose of our visit by saying that they were very appreciative of our presence and offer of help and that he was very concerned over the health of his people. He asked whether we felt that they were suffering from radiation illness and whether there was any cause for worry over future developments. As a result of this conversation and its immediate development, the TAKUYO records were promptly made available to us upon our request. There was no hesitation and no apparent restraint on the part of any of the ship's personnel. These are attached as Appendix III. The Captain of the SATUMA later made the same records available to us.

The next two hours were devoted to an examination and interpretation (literal and technical) of these records. A detailed discussion

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of the chronological sequence of events caused and points of question were explained to us by the Japanese using their records (course plots, radiation readings, decontamination procedures and medical examination records. See "Course Plots", Tab A, Appendix III and IV, and section "Japanese Radiation Readings and Decontamination".)

The services of the interpreters and of Dr. Hasler were definitely of value during this session although we were, on succeeding visits, able to communicate quite directly with the Japanese with satisfactory success. An outline of our plans for the following day's activities was discussed and arrangements made to begin at 0600 on the following morning (Saturday). Instructions were given for collecting the 24-hour urine samples, and it was arranged that Captain Gecke and Dr. Hansen would return early that evening with the urine containers. The next half hour was devoted, again, to a very pleasant visit during which more soft beverages, Japanese beer and tidbits were served. Our departure from the ship was accompanied by salutes, smiles, handshakes and waving.

Upon return to the hotel, the team engaged in a short conference, reviewing the day's activities and outlining plans for the next day.

After dinner at the hotel, the team, aircraft crew members, and Mr. and Mrs. Feldt spent a very pleasant evening over coffee at the home of Doctor and Mrs. Hasler.

26 July 1951. Saturday:

Our outlined plan of action was carried out as follows:

0600 All team members boarded the TAKHO which was now at anchor

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in the harbor (with the SATUMA) where they were moved earlier that morning to make room at the pier for an incoming vessel.

0800-0900 Lechausse and Coeke made a preliminary over-all check of radiation levels on the TAKUYO. Lechausse and Hansen selected twelve crew members from each vessel's complement for physical and laboratory examinations and radiation monitoring.

0900-1430 Coeke accomplished detailed and critical radiation survey of both ships assisted by Lt Colonel Frasee, Aircraft Commander, and utilizing the services of an interpreter. Also, an examination and evaluation of the Japanese radiation instrumentation was done. (For detailed survey findings, see sections "Radiation Survey Findings" and "Japanese Instrumentation".)

0900-1500 Japanese personnel to local medical clinic by launch and truck for medical history, medical examination and radiation monitoring by Dr. Hansen. (See section "Medical History and Examination.")

0900-1500 Alternating in two groups, the Japanese personnel were taken to the local pathology and x-ray laboratory for blood examinations. Dr. Lechausse, Mr. Shelton (Laboratory Director), and staff.

Urine: (24-hour samples.) Start of urine collection after first morning void which was retained for chemical (organics) analysis (to be done at Los Alamos Scientific Laboratories).

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NOTE: All personnel worked continuously until completion, although week-ends in the islands are to all local personnel, as Dr. Hassler phrased it, "sacrosanct".

1500-1700 Conference at hotel for review of day's activities and findings and with purpose of forwarding message to Commander JTF-7 which was dispatched at 261517 hours local time (see Tab , Appendix).

1700-1845 According to the urgent request (previous day) of Dr. Hassler, Lechasseur and Hansen presented unclassified, informal lectures on Nuclear Medicine to a group comprised of Dr. Hassler's medical staff and Rabaul private physicians. An interesting discussion period followed. Captain Goetz was in attendance and available for questions and answers. The meeting was terminated perforce by the approach of our dinner engagement as below.

1930 The team members were guests of Mr. and Mrs. Foldi at dinner (Chinese restaurant) and for coffee at their spacious and attractive mountainside home. Conversation was on a variety of subjects, extremely stimulating, and not related to our mission. The Hassler's were unable to attend due to another engagement.

Reviewing the day's activities, the team members agreed that we had successfully accomplished the programmed fact-finding and technical portion of our mission. We also felt that we could complete the remaining items by noon or shortly thereafter of the following day, Sunday.

27 July 1958. Sunday

0800-0845 Delayed through a minor misunderstanding. Our fault, strictly,

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in not having made explicit arrangements with the native skipper of the launch who had been placed at our disposal constantly—as were the cars and drivers—throughout our stay in Rabaul. The skipper was at Mass.

0900 Boarded TAKUYO after being ferried from deck by her launch which was sent in for us when they noticed us waiting on the deck. Greeted warmly again.

0900-1130 Proceeded to Captain's cabin. Joined by medical and scientific personnel of TAKUYO and, shortly, by the Captain of the SATUMA and his corresponding counterparts. After a short period of greetings, soft drinks, and general conversation, the subject of our final visit aboard arose very naturally when we were queried as to our findings regarding the health of the personnel by the Captain of the TAKUYO. He also stated that he was required "by his headquarters" to obtain a "written statement" from us before they (his headquarters) would approve his departure from Rabaul. The Captain of the SATUMA made a similar request at this time. We truthfully had not anticipated this eventuality and had no guidance on this particular point to rely on, although, at our final conference prior to departure for Rabaul, we had discussed every possibility and potential aspect. However, in view of the over-all technical success of our mission thus far and the cordial and cooperative relationship which had prevailed from the moment of our first contact, it

[REDACTED]

was decided that this was a reasonable and understandable request and the team leader indicated, without verbal discussion, that he was favorably inclined. Dr. Hanson and Captain Geake indicated agreement. As stated in our original summary dispatch message 290955Z to EMA/AEC (see Tab H, Appendix I), we felt impelled to do everything possible to obviate any possibility of even slight impairment of what we considered a most friendly and mutually beneficial relationship to this point. A denial of this request, for any reason we could think of, we felt would be very impolitic and a serious error. We therefore suggested that we would be happy to draft such a statement following a complete discussion of our findings with them. This was, in fact, done after our discussion and is quoted below.

There followed a detailed discussion of our examination of the ships and of the personnel and our summary impressions. During this period, our radiation dose-rate readings were copied, in toto, by each Captain or one of his people, from our original records. This was also done in the case of the blood counts by the TAKENO physician (the SATUMA doctor had been permitted to do so the day before at the laboratory, once our results had been recorded). There were questions as to when the results of the urine examinations would be known, and we advised that this would be a matter of 2-3 weeks if there was any evidence of radioactivity, sooner if there was none. The same regarding the blood samples.

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The team leader then drafted the statement which follows, and, after concurrence by the other team members, it was typed in several copies by one of the ship's personnel. We requested and received three copies. One copy was signed for each of the Captains as requested by them, and as Captain Matsubara said to the team leader in requesting his signature, "For souvenir, yes?" The statement:

"As a result of our examinations of the TAKIYO and the SATSUMA and of the personnel, our findings do not indicate evidence of radiation sickness or any contamination of either vessel which should delay your departure or normal use of the vessels or equipment either now or in the future.

"We are very desirous of conveying to you and all your personnel and to your headquarters our most sincere appreciation of everyone's complete cooperation and personal friendliness and help.

"It has been our pleasure to have had this opportunity of meeting you personally and working with you.

"We wish to express our thanks and sincere best wishes to you and all your people and wish you a safe and pleasant voyage home."

(Copy of original is attached as Tab B, Appendix VII.)

At this point, we presented to the Captains, who immediately called their scientific personnel around them, the dosimeters we were requested to deliver. (We also gave them an appropriate battery-operated charger.) We had with us twelve and gave them all, although eight only were mentioned in the original request. (See message 221643E from USARC, Tab G, Appendix I.) These were G-5 recticons, self-reading, quartz fiber electrometer type, officially designated as Bendix Model #411, Series B. The numbers of these instruments are recorded in Tab G, Appendix VII. Captain Goble instructed the scientific personnel in their use and gave

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them a short written description and instruction sheet, handwritten. It was emphasized that a dosimeter with this comparatively high range is used in the United States for purposes such as civil defense, weapons tests, and not for routine laboratory, industrial or training purposes. During this time the urine samples from both ships were collected and packaged for us by the Japanese.

Throughout this session, our hosts several times reiterated their thanks and appreciation for "your help". As often, we, in return, expressed our pleasure at being able to be of assistance and also for the opportunity of meeting them personally.

Two bottles of "Fine, Old, Kaya" Japanese whiskey made their appearance on the table at about this time; a pitcher of water, mats, rice cakes followed. Drinks were poured neat. The moment seemed propitious for our group to give the first toast. Our sincere feeling of cordiality and appreciation for the friendliness and cooperation shown us throughout our stay made this a spontaneous and natural gesture. This resulted in a short exchange of personal expressions of mutual respect and friendship—and more toasts.

As a particular evidence of the warm and personal atmosphere which existed, we relate the following: Captain Tanaka, Master of the SATUMA, a handsome, well-built and virile-appearing man, obviously well-traveled and sophisticated (who had informed us that he did not drink or smoke because "it is injurious to the health") now announced in response to our previous exchange of good wishes, "I will sing for you the New Zealand good-bye song.....I sing now!" He then sang to us in English, without

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accompaniment. It was a touching gesture. While we do not recall the words, the song ends on the theme of "We will be waiting to meet you again, sometime, somewhere."

Shortly thereafter, we said our formal good-byes. The group accompanied us to the ship's ladder where the entire crew appeared to be assembled on deck. At this time they presented to each member of our team a paper-wrapped, oblong package with their personal good wishes. (Our assumption as to the liquid contents was later confirmed to be "Fine, Old, Rare".)

Our actual departure was accompanied by handshakes, formal salutes and repeated good wishes and expressions of personal regard. In response to the continuous waving of all the Japanese, we returned the gesture from the deck of the launch and all continued to wave until we were out of sight of each other. Even from the dock, we exchanged hand-waving.

1200 Wrote and dispatched final message from Rabaul to Commander JTF-7 (see Tab L, Appendix I).

1330 The afternoon was very pleasantly spent with the Hasslers on a motor tour of the Caselle Peninsula, travelling the high ridge surrounding the harbor of Rabaul. Numerous native villages were pointed out to us and we actually visited one native hut. As explained to us by Dr. and Mrs. Hassler, the family groups sitting at the roadside and the noticeable foot traffic on the roads is the usual Sunday routine for the natives. Wherever we went, children and adults alike waved to us from the roadside. During this tour, we went through a recently

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opened, native-operated but Australian supervised sixty-bed hospital on a hilltop overlooking the harbor. Also, at the conclusion of our tour, we were conducted through a 400-bed newly-constructed regional hospital of most modern local design and construction. This remarkable installation, costing one million Australian pounds (\$2,400,000) is planned to receive its first patients in October, 1958. The pride of the local Administrator, and particularly of Dr. Hassler, was apparent.

With a view toward returning in small measure the personal attention and many courtesies and kindnesses extended to us by the Foldis and the Hasslers, we had invited these officials and their wives to be our guests at cocktails (at the hotel) and dinner (at a local Chinese restaurant). We were disappointed that the Foldis were unable to accept.

After cocktails at the hotel, while taking care of our hotel bill, Dr. Hassler evidenced apparent surprise that we were taking care of our bills and made a remark to Mrs. Richardson, the Desk Clerk, to the effect that the local authorities were handling this matter. However, we had already taken care of our obligations and would have done so, in any event, except upon insistence to the contrary by Mr. Foldi.

At this time, Mr. Gus Smiles again engaged us in conversation. During the course of this conversation, he advised one of us (Lechausse) about a news story in a Sydney, Australia, paper of the previous day. He offered to obtain a copy for us and did. (See Tab C, Appendix VI.) Also, during the course of this conversation, he asked Colonel Lechausse

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if he was aware of the fact that there was a Japanese newspaper reporter travelling aboard one of the vessels. He stated that he did not know this individual's name, but that, some five weeks prior, the local communications people had been advised of this person's impending arrival at Rabaul. They were requested to extend courtesies, including acceptance of collect messages. Mr. Smiles informed us that this Japanese reporter had been filing dispatches. In response to a direct question from Mr. Smiles as to how long we would remain in Rabaul, Colonel Lechasseur advised him of our early morning departure time. This resulted in the not unanticipated question as to our findings and opinions. In the presence of Dr. Hassler, Colonel Lechasseur advised Mr. Smiles to the following effect, although the words may not be an exact quote, "For obvious reasons, I am not in a position to make a formal statement. However, we feel that our results confirm, in general, those of Doctor Hassler and the local authorities. We have had a very pleasant stay in Rabaul and wish it were possible to stay longer." He then asked whether there was any danger on the ships or their presence in Rabaul. Colonel Lechasseur replied, "No". Later that evening, while we were at a Chinese restaurant, Mr. Smiles located us and delivered the clipping from the Sydney newspaper, without conversation.

C. DEPARTURE FROM RABAU and Return to Emirvotok

28 July 1958, Monday

0445 Team and aircraft crew members assembled at breakfast at hotel.
0515 Baggage loaded; team and crew proceeded to air-strip. Met by Mr. Fokki and Dr. Hassler and Mr. Gus Smiles.

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0600 Boarded aircraft after formal and personal good-byes.
0615 Wheels up
1415 local Arrive Peapack (Refuel)
1515 local Depart Peapack
1800M Arrive Eniwetok
1845M Arrive Parry
1900 Colonel Lecknase, Team Leader, reported verbally to Admiral
 Tyree, Deputy Commander, Joint Task Force SEVEN.

29 July 1958, Tuesday:

Team met for original conference on this documentary report. Format decided upon. Medical portion of report outlined since Colonel Hansen was scheduled to depart for the I.I. in the early afternoon. Formal summary report to Division of Military Application, U.S. Atomic Energy Commission; Secretary of Defense, and Headquarters USAF was dispatched (see Tab H, Appendix I). The report was completed, except for final draft and reproduction (three copies only), on the evening of 2 August 1958.

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CHAPTER III

RADIOLOGICAL FINDINGS

A. DESCRIPTION OF SHIPS

Both vessels are of the cutter type operated by the Japanese Maritime Safety Board and outfitted with scientific equipment for cartographic survey work in connection with the International Geophysical Year. The complement of the TAKUYO was 50 officers and men and on the SATUMA, 62 men, according to lists given to Dr. Haseler (Australian Health Officer). However, all local newspaper stories quote the TAKUYO complement as 51. The TAKUYO is a one year old, diesel-driven vessel, nicely outfitted, and in a clean condition. The SATUMA is a 14 year old, diesel-driven ship, and, relatively speaking, not quite as ship-shape. Neither ship is fitted with a distillation unit for evaporating sea water for drinking purposes and both ships loaded shore water at Tokyo for the trip. Maximum speed of both ships is 13 knots.

Two spellings of the name SATUMA will be noted. "SATSUMA" is the old spelling; "SATUMA" is the new one, now in use.

B. JAPANESE RADIATION INSTRUMENTATION

The TAKUYO MARU was equipped with a laboratory-type geiger counter and a scintillation counter with a deep water probe. All were of Japanese manufacture, but were very similar in design to equipment manufactured in the United States.

The geiger counter was equipped with a geiger tube with an end window of 1.43 mg/cm² thickness for beta measurement. Accessory equipment was an amplifier and scaler unit. Efficiency was said to be 9.6%.

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The scintillation counter probe encloses a NaI crystal of $1\frac{1}{2}$ inches diameter and $1\frac{1}{2}$ inches in length, and a Dumont photo multiplier tube in a steel pipe 7.8 centimeters in diameter. The probe was connected to a count rate meter by a very long cable on a reel, and used to take readings at varying depths below the surface. During the voyage from Japan, gamma background for the scintillation counter was reported to us as 2400 cpm. We were advised that 900 cpm was equivalent to 0.7 milliroentgens per week.

During the survey of the TAKUYO on 26 July, a rough check was made to compare the background readings of the Japanese scintillation counter with our MK-5. The following results indicate a reasonable check:

Scintillation counter: 3315 cpm gamma (equivalent to 0.03 mr/hr)

MK-5: 0.045 mr/hr gamma

The equipment on the SATUMA MARU consisted of one laboratory type geiger counter similar to that on the TAKUYO, and one 0-300 milliroentgen self-reading dosimeter and charger. The dosimeter was of Japanese manufacture and similar to our Keloket 0-300 milliroentgen dosimeter.

During the voyage of the SATUMA, the dosimeter hung in a plastic bag filled with a desiccant in a bulkhead doorway to the "Scientific Observation Room". The door remained open at all times and the dosimeter was therefore in an exposed position. Readings taken daily by the scientific personnel aboard are shown in Tab A, Appendix IV. The readings show the doses of 26 milliroentgens from 8 to 13 July, and 20 milliroentgens from 15 July to 19 July.

There was no air sampling equipment aboard either ship. The units for the air data (cpm per cubic meter) listed on the ships course plots

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refer to cpm recorded by the scintillation counter while the probe was exposed in air.

C. JAPANESE DECONTAMINATION PROCEDURES and Radiation Readings

A review of the data given to us by the ship's Captain shows that the TAKUYO ran through a rain squall between 2000 and 2300 hours, Japan Standard Time, 14 July 1958 (position 153°45' E and 12°23' N). Starting at 1200 hours JST, the background (using their figure of 2400 cpm) gradually began to rise. At 2200 hours, following the rain squall, a reading of 37,468 cpm, using the scintillation counter probe, was obtained. However, the probe itself was found to be contaminated, and, after being decontaminated by washing with a detergent (ethylene diamine tetra acetate (E.D.T.A.), their "neutrality cleanser") and rinsing with fresh water, the maximum count was 26,235. 37,468 cpm is equivalent to 0.31 mr/hr (using their figures of 500 cpm = 0.7 mr/week). All Japanese readings were taken with the scintillation probe close to the surface of the deck.

Between 0100 and 0400 hours, JST, 15 July, the radiation level remained at about 23,000 cpm. On advice from Tokyo, decontamination procedures were commenced at about 0530 hours, 15 July. Decks and equipment were washed with "neutrality cleanser" and flushed with either fresh or sea water. Generally, the level was reduced to about 10,000 cpm by this procedure. The bridge and bridge deck remained "high", however, and decontamination of this area was repeated at 1400 hours. This reduced the reading on the bridge to 17,470 cpm.

On the morning of 16 July, cleaning and washing of the inner parts of the ship was accomplished and measurements made daily, thereafter.

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These are shown in Tab B, Appendix III.

All parts of the TAKUYO continued to be washed and rinsed each morning until reaching Rabaul at 0900 hours JST, 19 July.

Decontamination of the TAKUYO personnel was also commenced on 15 July on advice from Tokyo. Men were directed to shampoo and shower, and the clothing of the crew was washed and monitored. On arrival at Rabaul, each crew member was given a haircut.

The SATUMA did not encounter rain (position 151° East and approximately West of the TAKUYO) and the officers routinely monitored their radiation level using their geiger counter and dosimeter. By this means they felt assured that the SATUMA had not encountered fallout radiation and was not contaminated. No decontamination measures were instigated. On arrival in Rabaul, the ship was monitored, using the TAKUYO scintillation counter, and the Captain advised us that all readings were at background levels. Monitoring was done on 18, 20, 21 and 25 July. Swipes were also taken on the SATUMA using ordinary chemical filter paper with an area of 4.9 square centimeters and swiping a 100 square centimeter area. The swipes were ashed and counted, using the geiger counter. The monitoring and swipe results are given in Tab B, Appendix IV.

D. RADIOLOGICAL SURVEY OF SHIPS

Two Beckman ME-5 (Serial Nos. 1146 and 65014) geiger counters and one Chatham CUV-700 (Model 3, #6306) geiger counter were used to establish background radiation readings in Rabaul. These instruments were calibrated the day prior to departure for Rabaul by Task Group 7.1 and Task Group 7.5 Rad-Safety organizations. On return to Eniwetok the calibrations were confirmed. A background dose-rate reading, taken at 2300

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hours, 25 July, outside our quarters in Rabaul, was established to be 0.06 to 0.07 mr/hr beta and gamma. This figure was confirmed at the Rabaul Public Health Authority Medical Clinic on 26 July.

Both the TAKUYO MARU and the SATUMA MARU were boarded the morning of 26 July for the purpose of making a detailed survey of radiation dose-rates on the ships. The entire exposed superstructure, including the decks, bulkheads, and exposed equipment such as winches, canvas, covers, rope, and awnings, were monitored using an MI-5 instrument. Readings were essentially background on both ships. Similarly, the interior spaces were monitored. This included officers and crews quarters, mess, baths and heads; the galleys, the wheelhouses, the chart rooms, the laboratories, and such spaces as paint, chain and storage lockers. The readings in these interior spaces on both ships were lower than background. While many of the crew members followed Captain Goeks because of curiosity, Chief Mate Oyama of the TAKUYO MARU and Captain Tanaka of the SATUMA MARU watched the taking of all measurements on their respective ships. One crew member of the SATUMA took still pictures of the monitoring procedures.

It is interesting to note that on the SATUMA MARU, two brass-colored metal parts of a gun, a fuse setting crank and a gunsight showed radioactivity. The readings were 10 mr/hr beta-gamma and 1.2 mr/hr gamma only. The guns were covered during the entire voyage and the rest of the gun and the canvas cover were at background intensity. The Captain was quick to let us know that these parts were from metal of United States origin.

Radiation readings taken aboard the ships follow:

1. Radiation Readings - TAKUYO MARU

Date: 7-26-58

Instrument: MK-5 Beta-Gamma Geiger Counter #1146

Background ashore: 2200 hours 25 July 1958:

0.06-0.07 mr/hr Beta-Gamma

All readings on exposed outer surface unless noted. Probe held almost in contact with the surface. Beta shield open. Only maximum reading recorded over each area examined.

<u>Location</u>	<u>Reading</u> <u>mr/hr</u>
Forecastle - Exposed	
Top of hatch - steel painted	0.07
Anchor winches - canvas cover	0.08
Winch	0.05
Repe coil on deck	0.07
Mat bumper coil	0.07
Canvas cover over steel cable	0.07
Forepeak Spaces - Enclosed	
Paint locker	0.03
Stowage locker	0.02
Chain locker	0.05
Deck swing (in place on 14th)	0.09
Coil fire hose	0.07
	rolled up at time of reading)
Forward Deck - Exposed	
Winch cover - canvas	0.09
Oily surfaces around winch	0.07
Deck surfaces - wood - portside	0.05 to 0.09
Windlass cover - canvas	0.09
Deck surface - wood - starboard	0.08
Wooden bench	0.11
	This had not been cleaned)
Beet Deck - Exposed	
Life raft cover - painted fabric	0.06
Reel steel cable - canvas cover	0.05
Deck surface - wood - aft	0.12
Winch cover - rubberized material	0.08
Lifeboat - canvas top - aft - starboard	0.10
Engine room ventilator area	0.06
Lifeboat - canvas top - forward - port	0.09
Vegetable locker - painted canvas	0.08

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<u>Location</u>	<u>Reading</u> <u>nr/hr</u>
Poop Deck - Enclosed	
Captain ensign space - deck	0.05
Reps Coil	0.06
Steering engine room oily floor	0.06 Hatch only) entrance)
Quarters - Enclosed	
Crew's mess - benches and tables	0.04
Deck	0.04
Clerk's room - deck	0.05
Crew's head	0.05
Officer's head	0.04
Officer's bath	0.05
Officer's mess	0.05
VIP quarters - rugs and chairs	0.04
Work spaces - Enclosed	
Laboratory - work tables and floors	0.05
Wireless room - deck	0.05
Galley - floors and work areas	0.05
Observation room (Scientific) - chairs, work space, decks	0.05
Wheelhouse - deck	0.06
Flying bridge - portable canvas cover	0.05
Upper bridge - Exposed	
Deck grating - wood	0.07
Compass cover - canvas	0.08
Instrument cover - canvas	0.08
Miscellaneous	
Engine room - sea suction	0.05
Air exhausts into room	0.04

2. Radiation Readings - SATUNA MARS

Date: 7-26-58

Instrument: MI-5 Beta-Gamma Geiger Counter #1146

Background Ashore: 2200 hours, 25 July 1958:

0.06-0.07 nr/hr Beta-Gamma

All readings on exposed outer surface unless noted. Probe held almost in contact with surface. Beta shield open. Only maximum readings recorded over each area examined.

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<u>Location</u>	<u>Reading</u> <u>sq/yr</u>
Forecastle - Exposed	
Deck - painted	0.07
Chain capstan cover - canvas	0.07
Rope reel cover - canvas	0.07
Rope on reel	0.08
Gun cover - in place during trip	0.07
Brass fuse setting ring and brass gunsight	1.2 Gamma
	10.0 Beta-Gamma
Life raft - forward - port	0.06
Sounding machine cover	0.05
Boat deck - Exposed	
Life boat canvas cover	0.07
Searchlight cover	0.07
Machine gun cover - starboard - amidship	0.06
Life boat canvas cover - starboard - aft	0.05
Weather balloon hatch - canvas cover	0.07
Upper deck - Aft - Exposed	
Winch cover - canvas	0.05
Canvas awning - not up during trip	0.05
Japanese flag - flew during trip	0.05
Pantail deck - Exposed	
Vegetable locker	0.05
Ceiling rope	0.06
Deck - steel	0.07
Quarters - Enclosed	
Crew's head - deck	0.06
Crew's bath - deck	0.05
Officer's head - deck	0.04
Officer's bath - deck	0.04
Purser's room - deck and work area	0.04
Wireless room - deck and work area	0.04
Crew room - deck and deck	0.04
Captain's quarters - deck and deck area	0.06
Work space - Enclosed	
Galley - tables and deck	0.04
Dispensary	0.04
Weather balloon - deck and gear	0.05
Observation room - scientific work spaces and deck	0.05
Miscellaneous	
Sea caution pipes	0.05
Air exhaust in quarters	0.04

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<u>Location</u>	<u>Reading</u> <u>μr/hr</u>
Bridge - Enclosed	
Observation room - deck	0.06
Steel deck	0.07
Compass cover - canvas	0.06
Upper bridge - Exposed	
Decking - wood	0.06
Deck - steel	0.06
Exposed exterior surface of bridge - steel - forward	0.06

B. DRINKING WATER

Drinking water was loaded by each ship before departure from Tokyo and their supplies replenished following arrival at Rabaul. Half-liter samples of the original drinking water loaded at Tokyo, and, also, mixed Tokyo and Rabaul water samples from different tanks were collected. The analysis for gross beta radioactivity was conducted by Task Unit 6 of Task Group 7.1 at Eniwetok Proving Grounds. The results are as follows (see Tab D, Appendix III and IV):

<u>TAKUYO</u>	<u>Gross Beta Activity</u> <u>d/s/ ml</u>
Tokyo water	0.7
Tokyo and Rabaul water	1.3
<u>SATUMA</u>	
Tokyo water	5.0
Tokyo and Rabaul water	0.5

These results show no evidence of radioactive contamination. The preferred 30 day limit for beta activity in drinking water is 2,600 d/m/ml, and the acceptable 30 day limit is 70,000 d/m/ml.

Neither ship was equipped with a distillation unit for evaporating sea water for drinking purposes.

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F. CALCULATIONS OF DOSE to TAKUYO MARU Personnel

Japanese data:

1. 2000 hours JST 14 July Rainout started
2. 2030 hours JST 14 July Rainout over
3. 2200 hours JST 14 July Highest count of 37470 cpm
4. 0530 hours JST 15 July Start of decontamination
5. Scintillation background = 2400 cpm
6. Contamination of scintillation counterprobe was 11,235 cpm
7. Conversion: 500 cpm = 0.7 mr/hr

Other data:

1. 1230 hours JST 12 July Detonation time

2. $I = I_1 t^{-a}$

3. Dose = $\frac{I_1}{a-1} \left[t_1^{1-a} - t_2^{1-a} \right]$

Where: t_1 = time of entry

t_2 = time of exit

I_1 = intensity at $H + 1$ hour

Assumptions:

1. The suspected event to have taken place at 1230 hours JST, 12 July

NOTE: The only instance where we are able to attempt an estimate of the decay rate from the Japanese data is compatible with the assumed time of detonation of the suspected event.

2. $a = 1.2$
 3. Continuous exposure of personnel to indicated dose rate for the time period used.
 4. Use 2030 hours 14 July for time of highest count:
 $H + 55$ hours = t_1
 5. Use 1130 hours 15 July for end of decontamination:
 $H + 78$ hours = t_2
 6. Use 0000 hours 27 July as time of monitoring TAKUYO:
 $12\frac{1}{2}$ days = H
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Calculations:

1. Using highest count with no background or probe contamination deducted:

$$I = \frac{37479(0.7)}{500 (168)} = 0.31 \text{ mr/hr}$$

$$I_1 = I t^{-1.2} = 0.31(122.6) = 38 \text{ mr/hr @ H + 1}$$

$$t = 55$$

Dose to Infinity: $t_2 = \infty$ (Infinity)

$$D = \frac{38}{1.2-1} [55^{0.2} - 0] = \\ = \frac{38}{0.2} [0.449] = 85 \text{ mr}$$

Dose to Monitoring: $t_2 = 300$

$$D = \frac{38}{1.2-1} [55^{0.2} - 300^{0.2}] = \\ = \frac{38}{0.2} [0.449 - 0.319] = 25 \text{ mr}$$

Dose to End First Decontamination: $t_2 = 70$

$$D = \frac{38}{1.2-1} [55^{0.2} - 70^{0.2}] = \\ = \frac{38}{0.2} [0.449 - 0.427] = 4.2 \text{ mr}$$

2. Subtracting background of 2400 cpm and probe contamination of 11,235 cpm:

$$37,479 - 2400 - 11,235 = 23,835 \text{ cpm}$$

$$I = \frac{23,835(0.7)}{500 (168)} = 0.20 \text{ mr/hr}$$

$$I_1 = 0.20(122.6) = 24.5 \text{ mr/hr @ H + 1}$$

Dose to End First Decontamination: $t_2 = 70$

$$D = \frac{24.5}{0.2} [0.449 - 0.427] = 2.7 \text{ mr}$$

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G. SUMMARY AND CONCLUSIONS

1. The Japanese data showed that their highest dose rate reading was only fifteen times their background readings as recorded during the early part of their voyage.

2. The background radiation level (0.06-0.07 mr/hr beta-gamma) in Rabaul was substantial, comparatively. No explanation for this is offered.

3. The relatively low cumulative gamma readings recorded on the SATUMA dosimeter do not necessarily indicate a true dose. It is entirely probable that radiation leakage of the instrument accounted for a large portion of the recorded dose.

4. The radiation dose rates on both the TAKUYO and SATUMA at the time of monitoring were found to be substantially identical. The decontamination measures carried out on the TAKUYO were effective in reducing the radiation level to essentially background.

5. Japanese data maximizes the whole body gamma dose inasmuch as the scintillation probe was held almost in contact with the deck. Similarly our radiation monitoring data is maximized since the geiger probe was also held in this same position.

6. The maximum radiation dose possible to TAKUYO personnel is calculated to be less than 5 milliroentgens. This assumes continuous exposure for the 15 hours from start of the rain squall to the end of the decontamination, at the highest count rate recorded by the Japanese. The dose rate by our own measurements at the time of our arrival was so small as not to permit any tenable calculations on this basis. Therefore, the Japanese data was used in all calculations. It will be noted that there

[REDACTED]

no significant difference between the white blood counts and white blood cell differential results of the personnel of the TAKUYO and those of the SATUMA, which received no contamination.

7. The infinite gamma dose, even with no decontamination of the TAKUYO, would have been an insignificant amount. Using Japanese data, the dose calculates to be about 85 milliroentgens.

8. The exposure of the TAKUYO and crew to an insignificant radiation dose resulted from a very local and transitory rain-out of not more than 30 minutes duration.

9. The analysis of the drinking water samples collected from the TAKUYO and the SATUMA show no evidence of radioactive contamination.

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CHAPTER IV

MEDICAL EXAMINATIONS AND FINDINGS

A. MEDICAL HISTORY

The medical history as obtained from the respective ship's physicians, medical technicians and from the ship's personnel themselves (and confirmed by the history as taken by Charles Haseler, M.D., Australian Regional Health Officer) revealed that no personnel on either ship presented any complaints of illness to the ship's doctors subsequent to 14 July until arrival at Rabaul. Upon arrival there, two people were examined by Doctor Haseler at the request of the TAKIYO MARU'S physician. (See records on Akagi and Maseda; Tab A, Appendix II.) These individuals were not considered to have any symptoms or evidence of radiation sickness by Doctor Haseler or by us following our subsequent examination. At the time of our arrival, all personnel on both ships were reported to us as active in their normal duties with no loss of appetite, malaise or illness of any sort.

B. PHYSICAL EXAMINATION AND RADIATION MONITORING

Twelve persons from each ship were given a physical examination. They were also monitored for any external radioactive contamination using an NL-5 Beta-Gamma Survey Meter with the beta window open, after a background reading was obtained in the examining room.

These twelve people from each ship included the seven individuals who had originally been examined by Doctor Haseler and his staff, plus five others whose white blood counts were the lowest from each ship, as determined by the counts performed by the TAKIYO MARU'S doctor and by

[REDACTED]

the Australian health authorities. The SATUMA MARU's physician had not done any counts aboard ship.

The survey for possible radioactive contamination was a whole body survey with particular emphasis placed on the hair, fingernails and feet. It is mentioned that all of the personnel of the TAKUYO had previously showered and been given a shampoo and haircut. The background in the clinic where the examinations were performed was 0.06 milliroentgens per hour, beta and gamma, at the time of examination. None of the people examined had any contamination as determined by this survey. (All individuals were understandably very interested and scrutinized the dial on the survey meter quite closely as they were monitored.)

The physical examination included a careful inspection of the skin for possible beta burns or any early indication thereof. None were detected. In addition, the head and neck were examined carefully, including an ophthalmoscopic examination. No lenticular opacities were noted nor were any enlarged thyroids encountered. There were no abnormal instances of lymphadenopathy.

The chest and abdomen were examined thoroughly (excluding genitalia and rectum) with no abnormalities noted. Although a non-tender liver edge was palpable at the right sub-costal margin in several of these people, this was considered not unusual in individuals of this body build. No cases of splenomegaly were detected nor were any enlarged kidneys palpated.

Blood pressures were obtained on all, and, allowing for mild elevations due to strangeness and possible apprehension, no hypertension

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names.)

Although explicit directions were given the evening before beginning the collection of urine, we cannot be certain that they were collected as instructed. However, this is not too important technically since we intended to use the first morning void for organic examination and expected probably to pool the urines, ultimately. We were mainly concerned with having specimens from each ship separately and in adequate amounts. These we are fairly certain we have.

Urines, blood vials and blood smears were brought back to home station with us. Specimens were shipped by courier to Travis AFB and from there by commercial air to:

1. 24-hour urines and intravenous bloods to:

1st Colonel James Hartgering, USA (MC)
Walter Reed Army Institute of Research
Washington, D.C.

For examination for any possible radioactivity.

2. Urine (first morning void) to:

Health Division
Los Alamos Scientific Laboratory
Los Alamos, New Mexico

For organic chemical analysis.

3. Blood smear slides for white blood cell differential evaluation to:

Colonel Frank Townsend, USAF (MC)
Deputy Director
Armed Forces Institute of Pathology
Washington, D.C.

It should be mentioned that it would have been impossible to accomplish these activities in one day without the facilities (laboratory,

[REDACTED]

was diagnosed.

Routine neurological examination was done on all and no abnormalities noted.

Copies of physical examinations are attached as Tab A, Appendix V.

In summary, this was a group of twenty-four healthy young males who presented no complaints at the time of examination or on questioning and who exhibited no detectible significant abnormalities.

C. LABORATORY EXAMINATIONS

A red blood cell count, white blood cell count, smear (slide method) for white blood cell differential examination, hemoglobin (Sahli method) were done. Intravenous blood was drawn on six individuals (15 cc each) for examination for radioactivity. These bloods were taken from the antecubital fossa veins directly by separate intravenous needles and allowed to drip directly into a 15 cc vial containing oxylate since we did not have available individual syringes of adequate size. The blood vials were numbered in accordance with the list attached (see Tab C, Appendix V.)

The blood smears were fixed in methyl alcohol for two minutes. They were not stained, but each was marked with a pencil number (no labels available) and placed in order 1-24, in correspondingly numbered slots in a slide box.

All blood counts and hemoglobin determination were done in order of taking and recorded (see Tab C, Appendix V) as soon as done.

Blood vials were refrigerated at the clinic.

Twenty-four hour urine samples were collected on seven people, three from the SATSUMI and four from the TAKUTO. (See Tab B, Appendix V, for

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clinical and transportation) and cooperation made available to us
Mr. Feldt and Dr. Hassler. Of special note was the cheerful, ex-
and unselfish, hard work of Mr. Shelton, Laboratory Chief, and his
tire staff of five people. All worked on with us through the noon
(at their desire) until completion. We are extremely grateful and
pressed ourselves to this effect.

B. CALCULATED DOSE TO PERSONNEL

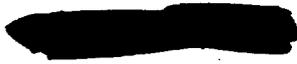
1. Using all maximized assumptions and numbers so as to provide
the worst possible situation, we calculate:

- a. Dose from time of reported rain-out to infinity: 85 millirads
- b. Dose from time of reported rain-out to our arrival in Rabaul (12.5 days or 300 hours): 25 millirads
- c. Dose from time of reported rain-out to completion of first decontamination procedures (15 hours): 4.2 millirads
- d. Same as c above, but deducting background and probe contamination: 2.7 millirads

2. For detailed calculations, see paragraph "F", under "Radiological Findings".

E. SUMMARY AND CONCLUSIONS

- 1. There is no evidence at this time of any detectible effects resulting from exposure to ionizing radiation.
- 2. There have been no cases of radiation sickness on either



Any complaints of illness subsequent to 24 July 1953 were due to other causes; i.e., possible infectious hepatitis or other intercurrent illness. It is noted that five total white blood cell counts are below 5,000 and one count is 3320. Hemoglobin is normal and the red blood cell count on these individuals is within normal range or slightly below. One red blood cell count of 3,160,000, with a hemoglobin of 7%, is recorded. It is not felt that these results can be attributed to the radiation exposure experienced as per our calculations of the dose received.

3. There will be no detectible effects and, in the light of present medical knowledge, no deleterious medical effects, in fact, resulting from the minimal radiation exposure experienced, as calculated by us.

4. There was no detectible evidence of radioactive contamination of personnel at the time of examination.

5. There is no medical indication for restriction of the normal activities of any of the personnel of either vessel.

NOTE: Since writing this report we have received (7 August) the results on the blood smears for white blood cell count and evaluation.

These were accomplished at the Armed Forces Institute of Pathology and are recorded with the other blood results as Tab C, Appendix V.

Comment: The wide range of results obtained by different technicians and some of the apparent inconsistencies between (1) white blood cell differential and total white blood cell count, (2) platelets and red blood cell count and hemoglobin, is not explained by us. The poor fixation of the blood smears must be taken into account.

[REDACTED]

While there is no question but that such findings can be related to definite radiation sickness or acute exposures of 50 roentgens or more, the absence of clinical complaints or illness in these individuals (Japanese) prior to our arrival or at the time seen (12 days after reported exposure) and the calculated maximum dose received, makes any relation to radiation insult untenable in this instance. The blood smear results as reported by the Armed Forces Institute of Pathology must then be regarded as incidental findings indicating further medical investigation by Japanese doctors, perhaps, but on the basis of an etiology other than ionizing radiation insult as a result of this present exposure.

CHAPTER V

FINAL SUMMARY AND CONCLUSIONS

Since the dose rate by our own measurements at the time of arrival was so small as not to permit any tenable calculations on this basis, the Japanese data was used in all calculations utilized in arriving at our conclusions.

1. The Japanese data showed that their highest dose-rate reading was only fifteen times their background readings as recorded during the early part of their voyage.

2. The relatively low cumulative gamma readings recorded by the SATUMI dosimeter do not necessarily indicate a true dose. It is entirely probable that radiation leakage of the instrument accounted for a large portion of the recorded dose. If accepted as real, this indicates a total dose of 50 millirentgens between the dates July 1 and July 15.

3. The radiation dose rates on both the TAKUYO and SATUMI at the time of monitoring were found to be substantially identical. Decontamination measures carried out on the TAKUYO were effective in reducing the radiation level to essentially background.

4. Japanese data maximizes the whole body gamma dose rate as much as the scintillation probe was held almost in contact with the deck. Similarly our radiation monitoring data is maximized since our geiger probe was also held in this same position.

5. The maximum radiation dose possible to TAKUYO personnel is calculated to be less than 5 millirentgens. This assumes a maximum exposure for the 15 hours from start of the rain squall to the end of the voyage.

[REDACTED]

of the decontamination, at the highest count rate recorded by the Japanese. An additional 2-3 milliroentgen total may have been accepted between this time and our arrival at Raheul (total 300 m

6. The infinite gamma dose, even with no decontamination of the TAKUYO, would have been an insignificant amount. Using Japanese data, the dose calculated to be about 85 milliroentgens.

7. The exposure of the TAKUYO and crew to an insignificant radiation dose resulted from a very local and transitory rain-out not more than 30 minutes duration.

8. The analysis of the drinking water samples collected from the TAKUYO and the SATUMA show no evidence of radioactive contamination.

9. There is no evidence at this time of any detectible effects resulting from exposure to ionizing radiation.

10. There have been no cases of radiation sickness on either vessel. Any complaints of illness subsequent to 14 July 1958 were due to other causes; i.e., possible infectious hepatitis or other infectious illness.

11. There will be no detectible effects, and, in the light of present medical knowledge, no deleterious effects, in fact, result from the minimal radiation exposure experienced, as calculated.

12. There was no detectible evidence of radioactive contamination of personnel at the time of examination.

13. There is no medical indication for restriction of normal activities of any of the personnel of either vessel.

[REDACTED]

CHAPTER VI

GENERAL COMMENTS

A. COMMENTS ON AUSTRALIAN RECORDS AND DATA

1. Ref: WND 3/A/1378, dated July 21, 1958. (Tab A, Appendix II)

a. Paragraph 3: The statement "they sailed through the Pacific 500 miles west of the last atom explosion center in the Caroline Islands" is, of course, not consistent with our knowledge of the location of the suspected event which took place at Bikini Atoll. On the other hand, they were about 520 miles from Eniwetok and 720 miles from Bikini according to their position as shown on course plot (Tab A, Appendix III) and as reported to our Government in their official advisories.

b. Paragraph 3: The statement "it was about 70 milliroentgens" is meaningless either as a dose or dose-rate figure in the context in which given. No time unit is indicated. This is further confused by the fact that Captain Matsubara is reported in the local (Rabaul) newspaper as using a figure of 70 to indicate that this represented a number such as "20 counts per minute above the limit of human safety." In actuality, the number 70 really indicates 20 counts per minute above the higher normal background limit of the instrument in question. Reference next paragraph below and page 4 story, RABAUL TIMES, dated 25 July 1958, column 3, paragraph 1, under subhead "above limit." (Tab B, Appendix VI).

c. Paragraph 4: The numbers quoted are well within the normal background range quoted in their second interview with the Australian authorities. Reference WND 3/A/1410 dated July 24, 1958, paragraph 8,

[REDACTED]

and answer to question #7 in July 22 interview by Sub-Inspector Stewart.

2. Ref: RND 1/4/1410, dated July 24, 1958. (Tab C, Appendix II)

a. Paragraph 10: The "0.7 milliroentgens" should read "0.7 milliroentgens per week" according to information given us by the Japanese. 36,000 cpm represents 30.4 milliroentgens per week, on this basis.

b. Reference is made to paragraphs 4 through 8 on page 2, which refer to the only two cases of any sort of complaints mentioned by the Japanese.

3. Ref: 22 July Interview by Sub-Inspector Stewart (Tab B, Appendix II)

a. Answer 3: (a) The correction in pen and red pencil on the original copy is not initialed and was done by one of the Rabaul officials. (b) We were informed by the Japanese that this number should be 3,600 and the correction is therefore authentic. The units should be cpm (counts per minute) rather than ml (milliliter).

b. Attention is invited to questions 9 through 14 and the respective answers.

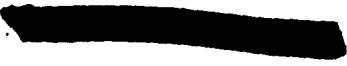
c. Attention is invited to the final paragraph.

B. COMMENTS REGARDING NEWSPAPER CLIPPINGS

1. July 24, 1958, Thursday. SOUTH PACIFIC POST, Port Moresby, Papua - New Guinea. (Tab A, Appendix VI)

a. Attention is invited to paragraph one and the fact that this release was made prior to our arrival at Rabaul.

b. Attention is also invited to the paragraphs referring to the absence of any illness or radiation injury. 5



2. July 25, 1958, Friday. THE RABAUl TIMES, Rabaul, New Britain.
(Tab B, Appendix VI)

a. Attention is invited to the page 1 box and the two-page feature story on pages 4 and 5.

b. Note is made of varying statements regarding distances from Riwotek Proving Grounds. Reference is made to Japanese Course Plots (Tab A of Appendix III and IV)

c. Particular attention is invited to column three, page 5, sub-head CAUSE.

d. Under sub-head HOUSING, those portions relating to activities of personnel of both ships is interesting.

3. 25 or 26 July 1958, from Sydney, Australia (! TELEGRAPH).
(Tab C, Appendix VI)

a. This newspaper clipping was supplied to us by Mr. Gus Smiles, local reporter, unsolicited. The red pencil check marks are his, calling our attention to what he termed "mis-statements". They are, in fact, mis-statements, on the basis of our investigation.

C. COMMENTS ON MISSION

1. Recognizing that the Japanese had been instructed to cooperate and offer all possible aid to us, the team members agreed that their information and data was given to us willingly, in good faith, and, without question, graciously.

2. It is believed that lack of specific knowledge regarding radiation measurements, interpretation of readings, and, certainly, of professionally known effects of ionizing radiation on people was responsible

[REDACTED]

to a great degree for the situation which developed. The apparently sincere and marked apprehension on the part of the Captains of both vessels for their people understandably contributed, also.

3. The team's original reaction to the fact that the ships had not gone to Guam as originally planned was one of concern because of the greater lapse of time on the voyage to Rabaul, and the feeling that facilities for accomplishment of the mission would probably be more adequate at Guam. However, we now believe that the actual developments will prove to be in the best interest of the United States Government. This, by virtue of the fact that a third and neutral Government entered the picture. Aside from one or two press reports which may have misquoted Doctor Hassler in regard to radiation sickness, we feel that over-all actions of the local Australian authorities were restrained and non-alarmist, especially in view of the fact that this was their first experience with such a potentially troublesome situation.

4. A large credit for the smoothness of our mission must be given to the local Australian authorities for their handling of the situation prior to our arrival. Every facility (medical clinic, laboratory facilities, transportation--both water and land) was placed at our constant disposal and every courtesy extended to us.

5. The mission is considered to have been successful from our standpoint, but potential future Japanese press comments, particularly upon arrival of the ships in Japan, may still present problems. This may be anticipated, especially in view of the reported presence of a Japanese newspaper reporter aboard one of the ships and the coincidence

[REDACTED]

imminence of the forthcoming conference (12 August, in Japan) on banning hydrogen weapons tests.

[REDACTED]

CR 5516

TOR 19/1109Z/JF

ROUTINE

DTG 190204Z

FROM CINCPAC

INFO CJTF 7 ENIWETOK

READDRESSED:

FROM TOKYO DTD 17 JULY 10 AM

TO STATE 110

INFO CINCPAC 32 (CINCPAC FOR POLAD)

COMUS JAPAN

"CNO NOT ADEEE PASS BY CNO 171905Z 2 MARITIME SAFETY BOARD SHIP
ENGAGED IN PACIFIC SURVEY PROJECTS IN CONNECTION IGY HAVE REPORTED H
LEVELS OF RADIOACTIVITY IN VICINITY OF TRUK. SHIPS HAVE INFORMED MS
19,000 COUNTS PER LITER AND SEA WATER RADIOACTIVITY OF 247 COUNTS PE
PER MINUTE. VERNACULAR PRESS HAS GIVEN FAIRLY EXTENSIVE BACK PAGE P
TO THESE REPORTS. MSB OFFICIALS TOLD NAVAL ATTACHE THAT CREWS ON BO
SHIPS ARE VERY WORRIED ABOUT RADIOACTIVITY. MSB, THOUGH NOT TOO COM
ABOUT REPORTED LEVELS OF RADIOACTIVITY, HAS DIVERTED BOTH SHIPS TO R
FOR FRESH WATER DECONTAMINATION. SIGNED MACARTHUR"

NOTE: REF 171905Z NOT IDENTIFIED

COG: J-3
INFO: COMD, J-4
LOG NR: 8762

TOR: 20/1930M JUL 58

DTG: 190204Z/1

BEST AVAILABLE COPY

GR 5587

TOR 211015Z/CMM

OPERATIONAL IMMEDIATE

210812Z

FM CINCPACFLT

INFO CJTF 7

CTG 7.3

CINCPAC

COMNAVMARIANAS

ALUSNA MELBOURNE

READDRESSED FROM

FM ALUSNA TOKYO 2.0218Z

TO CNO

INFO CINCPACFLT/COMNAVORJ
CINCPAC

"MY 162206Z X MSB REPORTS SOME OF CREW OF TAKUYO MARU LOSING
BLOOD COUNT AS A RESULT OF RADIOACTIVE FALLOUT X USS INFORMALLY REQ
AID IN FLYING MINIMUM OF 10 AND MAXIMUM OF 5L OF CREW FROM RABAU
JAPAN FOR TREATMENT X MSB FURTHER REQUESTS AID IN DECONTAMINATING S
WOODEN DECK AND CANVAS AWNINGS REPORTED TO BE TROUBLE SPOTS X AMEME
CONCERNED AND RECOMMENDS MEDICAL AND DECONTAMINATION ASSISTANCE X A
HEALTH AUTHORITIES PRESENTLY CONDUCTING TESTS ON CREW AT RABAU"

NOTE: REF 162206Z IS LOG NR 8673, J-3

COG: J-3

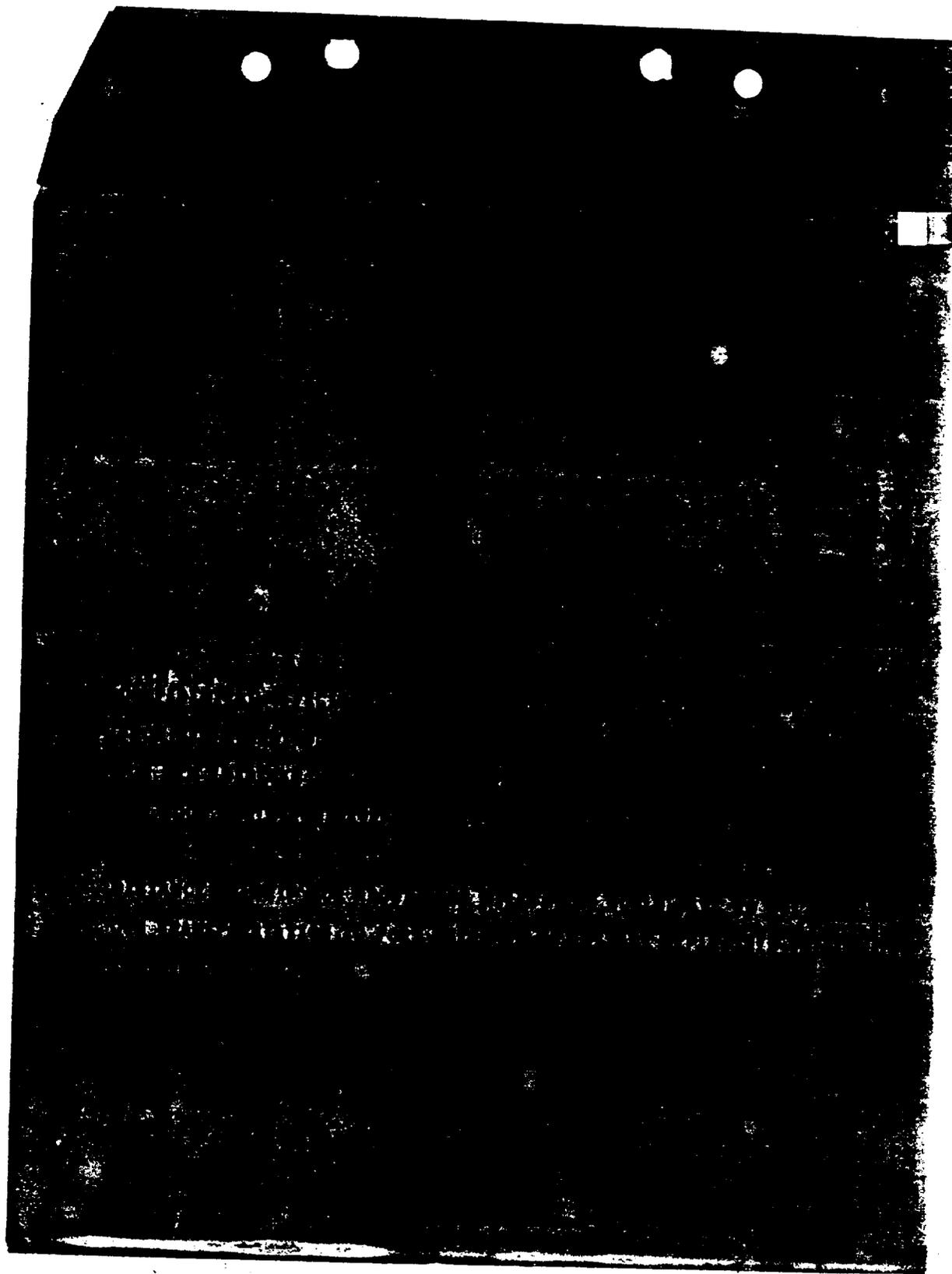
INFO: COMD, J-4, SSG

Log Nr: 8844

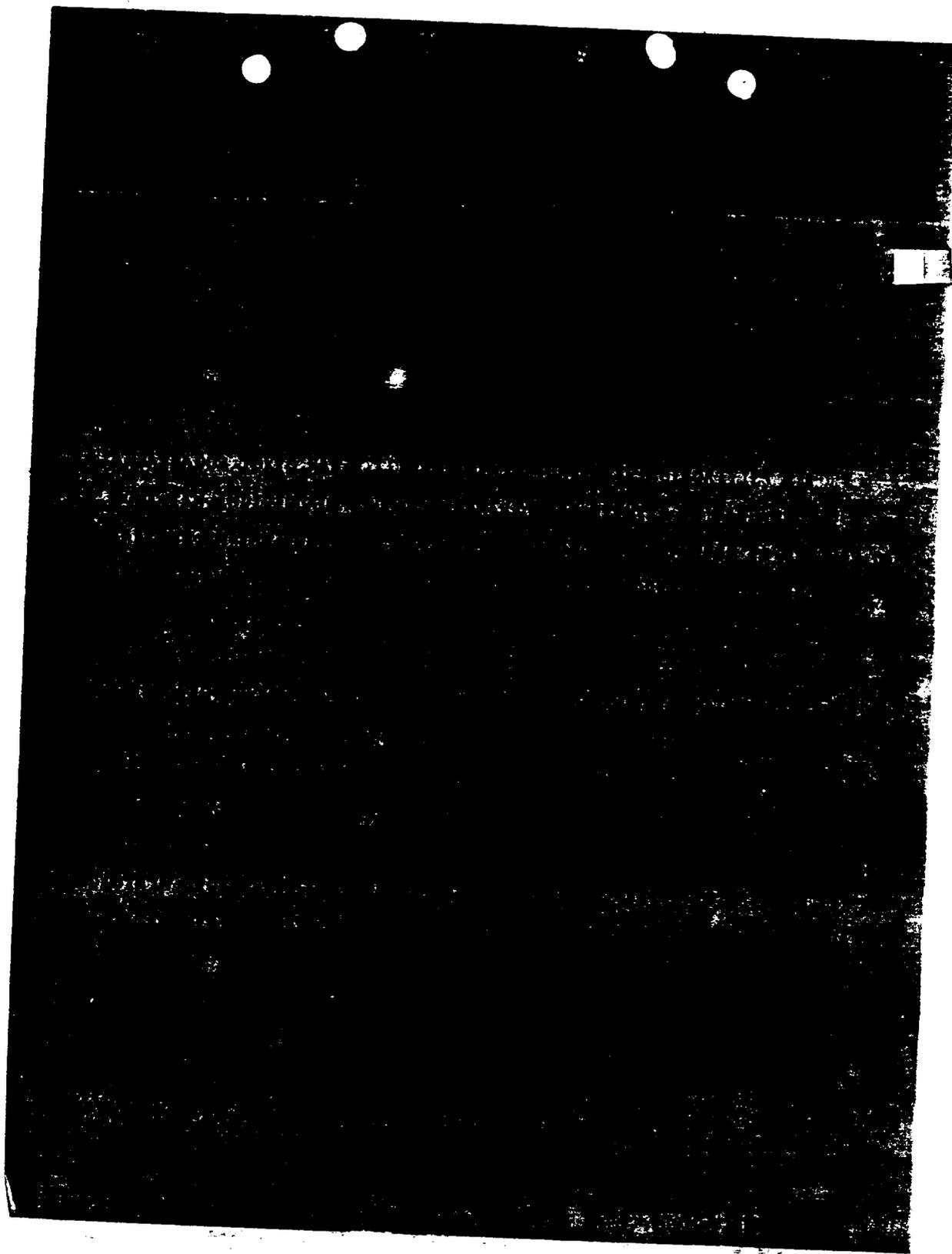
TOR: 21/2235M

DTG: 210812Z
TDTG: 210218Z

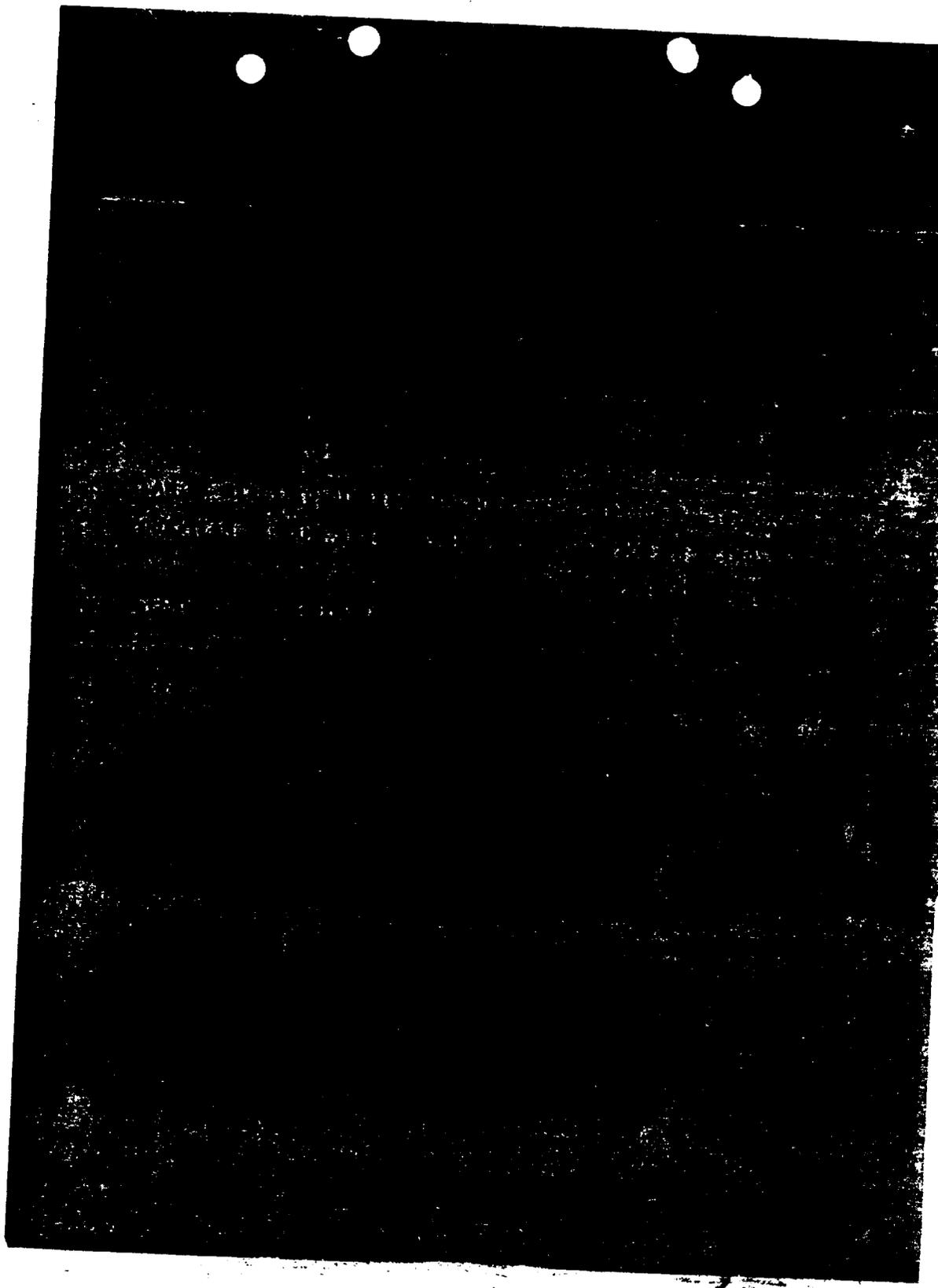
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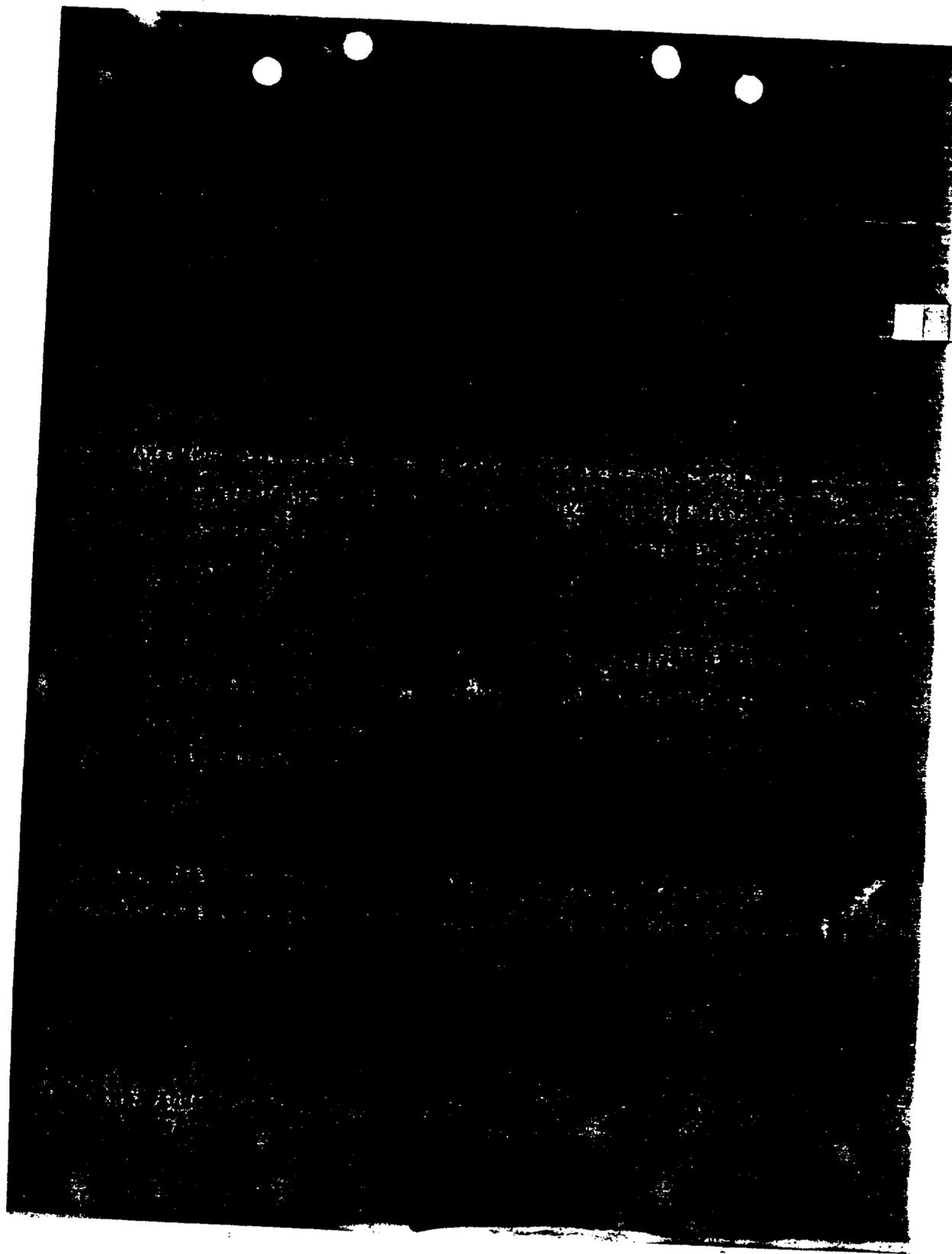
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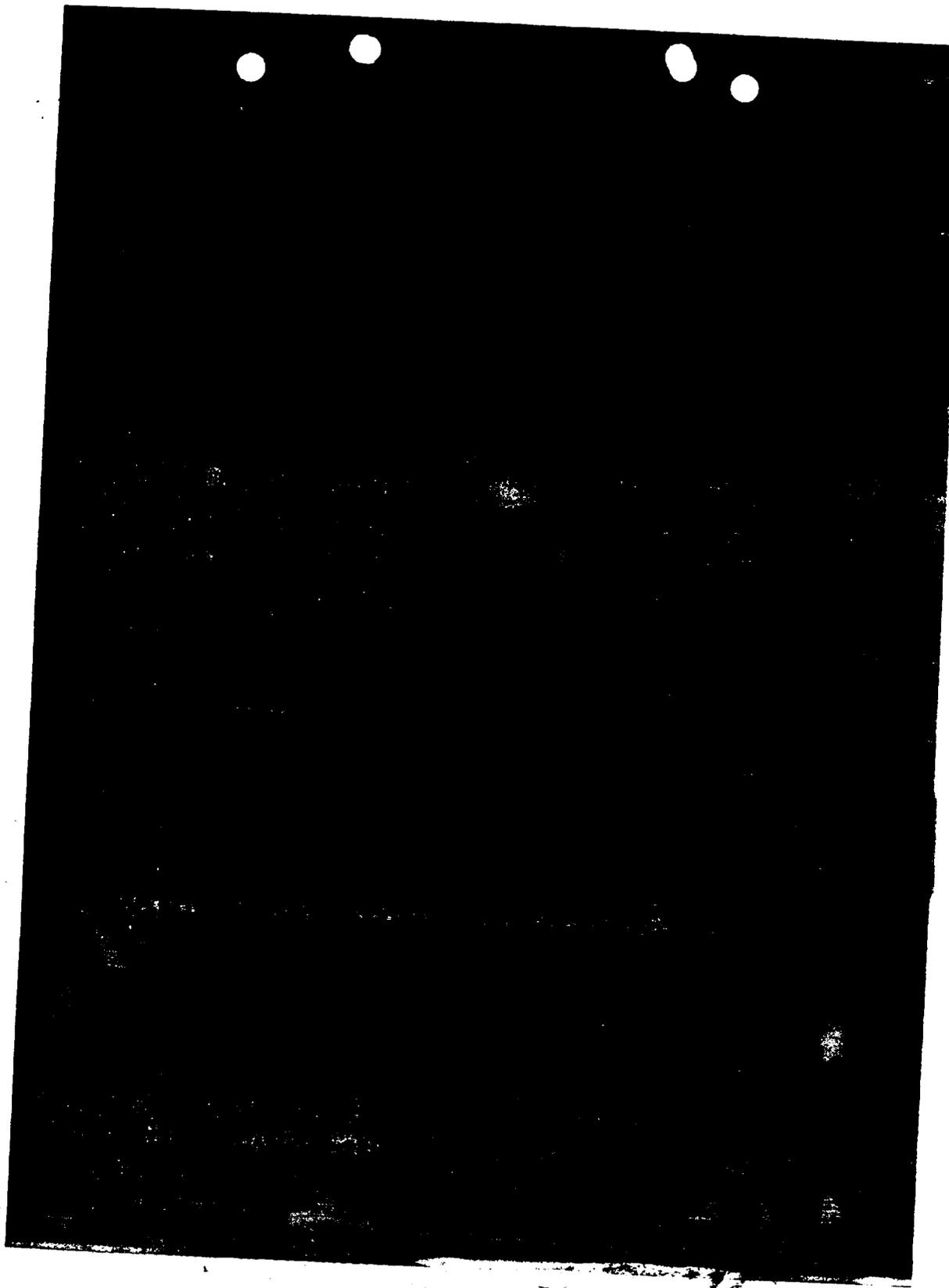
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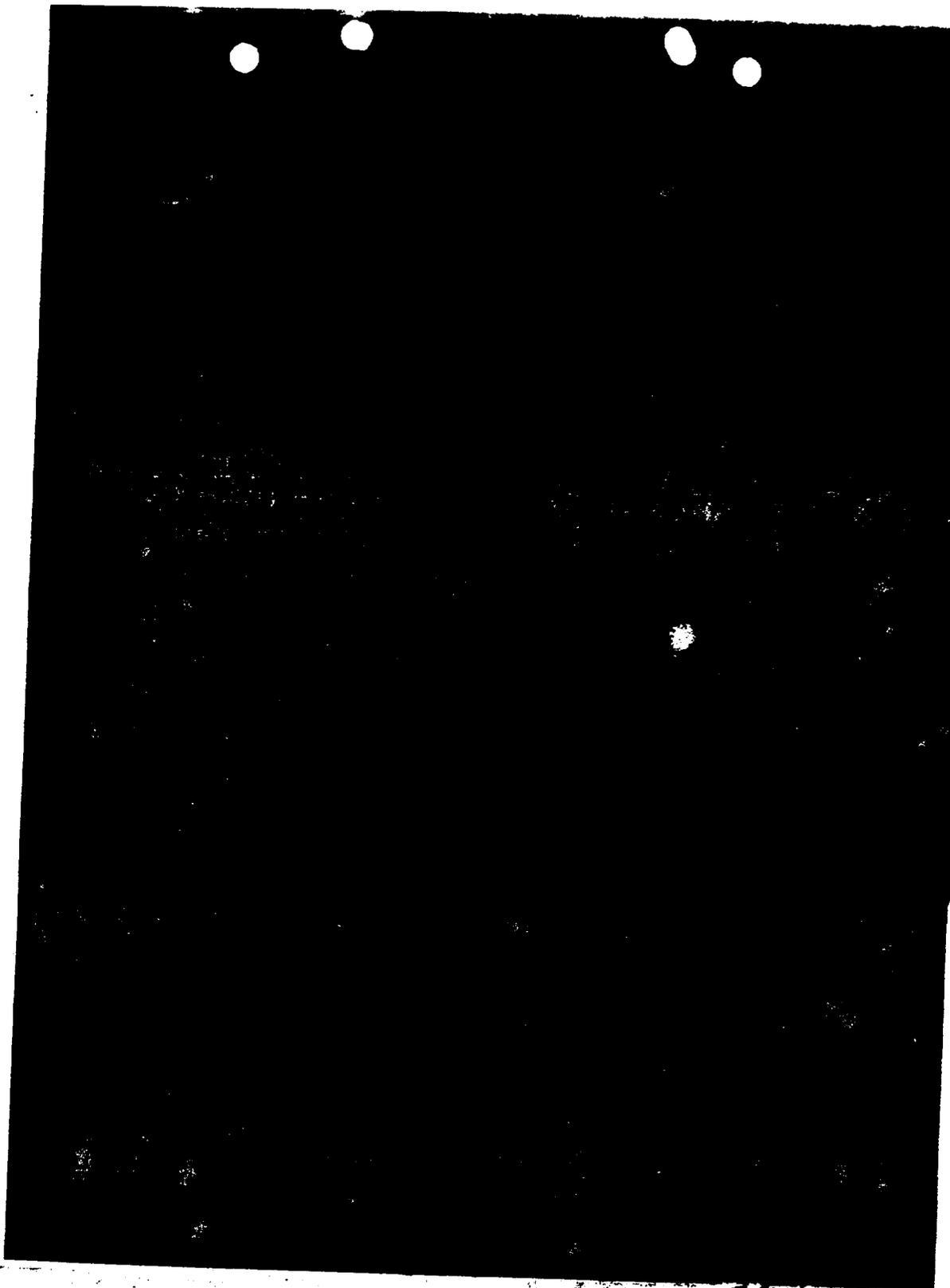
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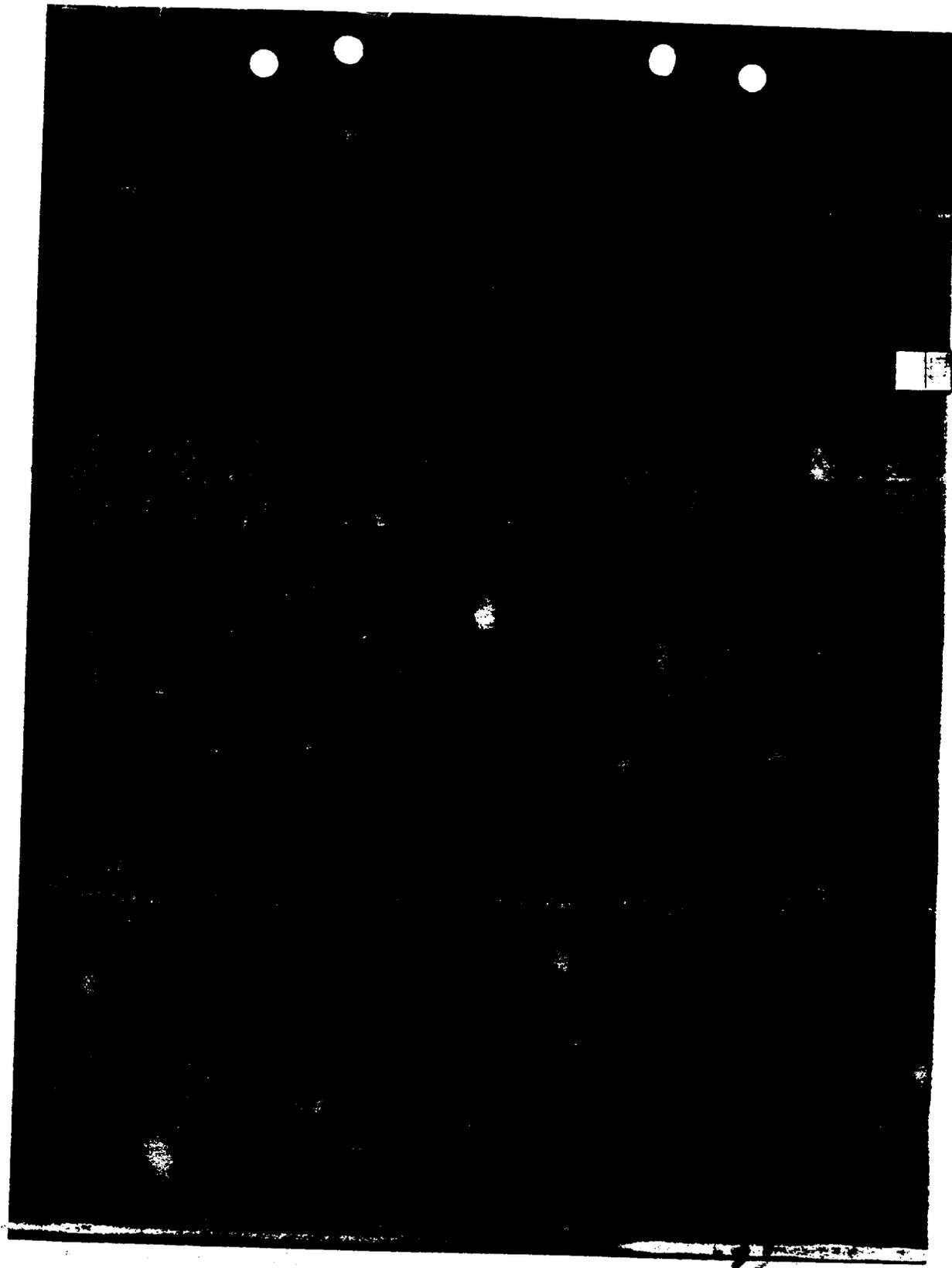
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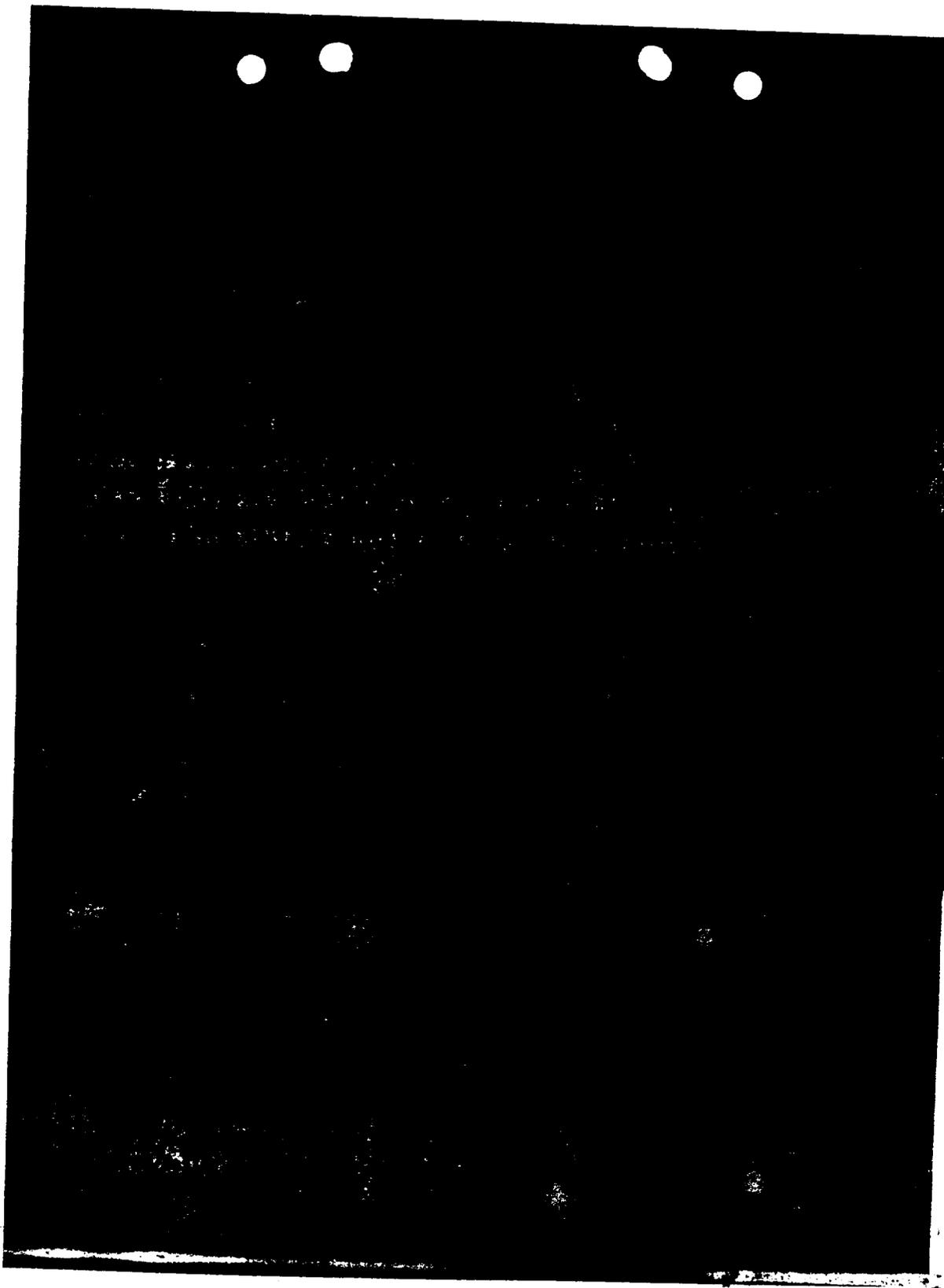
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ITEM NBR 8.
OFFICIAL/CONFIDENTIAL
FOR LEDGER
FROM LINDSECK

CONFIDENTIAL//PASS TO STARRING:
IN REPLY TO YOUR QUERY THE FOLLOWING TEAM IS STANDING BY:

READ INFO IN FIVE COLUMNS X NAME X BIRTH X US CITIZEN X UNIT ATTACHED/
MILITARY RANK, SER NO. X

LECHAUSE, RALPH M./NEWARK (ESSEX) N.J. 7 SEP 1906 X YES X HQ JTV-7 X
COL 80418A USAF

COCKE, ROBERT E. X POST FALLS IDAHO, 31 DEC 1917 X YES X CTC 7.5 X
CAPT. USPHS PHS-3124

HANSEN, CARL L., JR. X SPRINGFIELD (HAMPTON) MASS. X YES X TG 7.4 X
LT COL. USAF 19353A

CREW

FRAZER, MALCOLM C. (PILOT) X SAN DIEGO (SAN DIEGO) CALIF. 19 APRIL
1923 X YES X TG 7.4 PAR ELEMENT X LT COL USAF 19564A

FLEMING, RUSSELL A. CO-PILOT X LOS ANGELES (LOS ANGELES) CALIF.
16 JAN 1932 X YES X TG 7.4 PAR ELEMENT X 1ST LT USAF AO-302910

WILLARD, ERNEST H. III (NAVIGATOR) X KNOXVILLE (KNOXVILLE) TENNESSEE
5 JUNE 1927 X YES X TG 7.4 PAR ELEMENT X CAPT USAF AO-991264

WARD, JAMES F. (RADIO OPERATOR) X HOMES, FLORIDA 6 MAY 1927 X YES X
TG 7.4 PAR ELEMENT X SSOT USAF AFA4113670

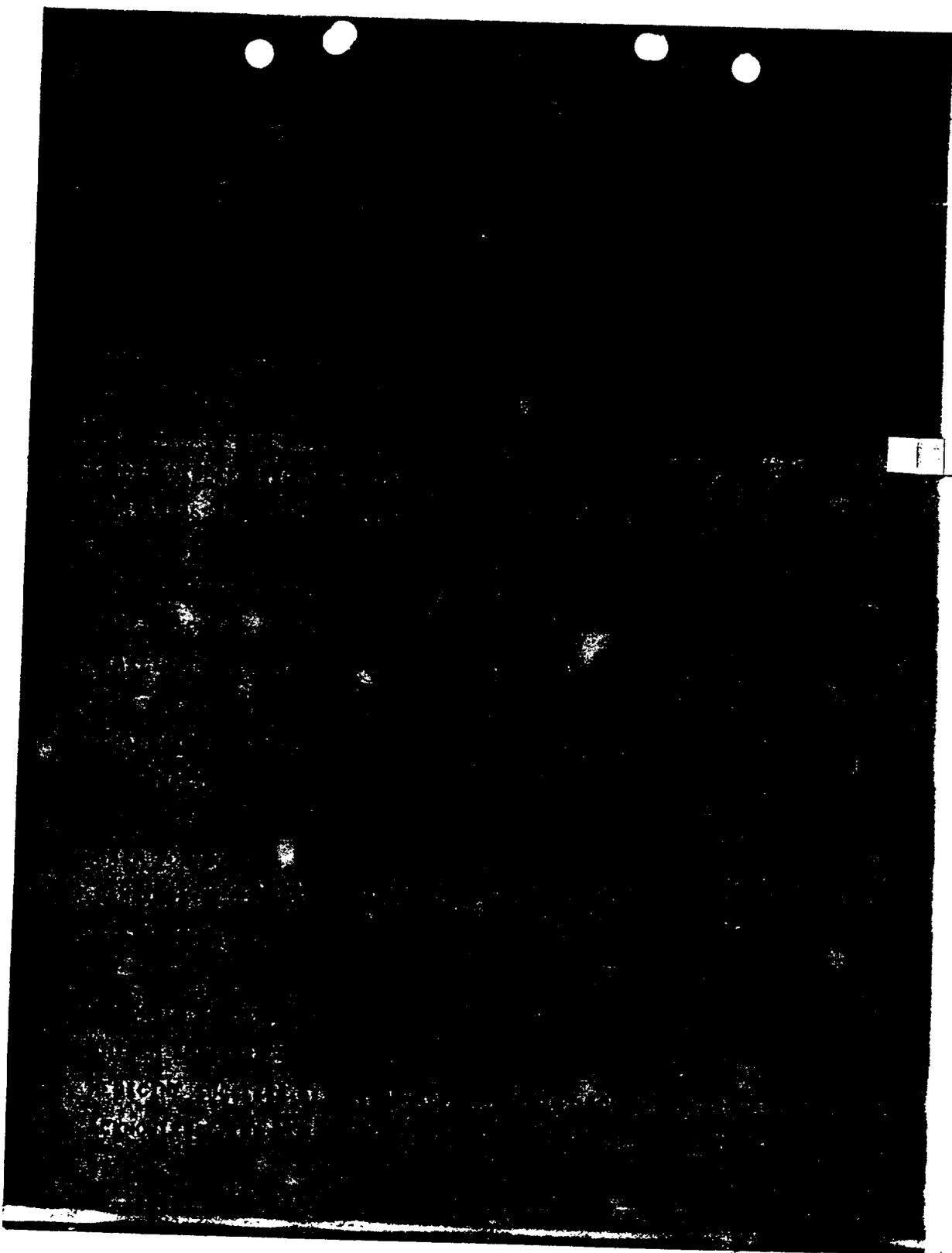
BORING, JOHN G. (FLT ENG) X VINTON, OHIO, 26 NOV 1932 X YES X TG 7.4
SSOT, USAF AF-15296125

AIRCRAFT SA-16 NUMBER 51024 FLYING TIME METOX TO TRUK 5.20 TRUK TO
RABAU 5.40

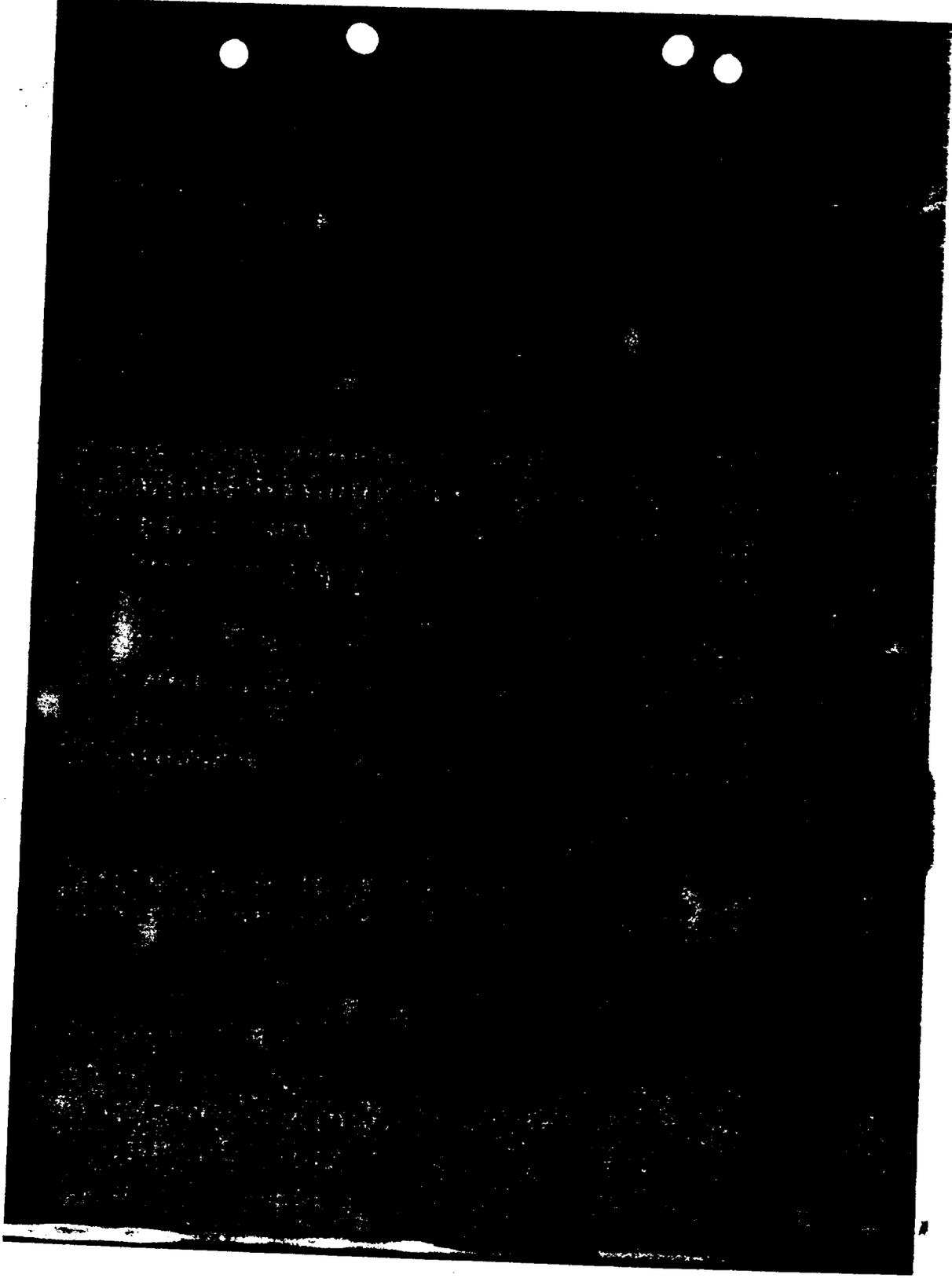
CORRECTION: ADD DATE OF BIRTH LT COL HANSEN AS "23 Jan 1920".
END ITEM NBR 8.

C O N F I D E N T I A L

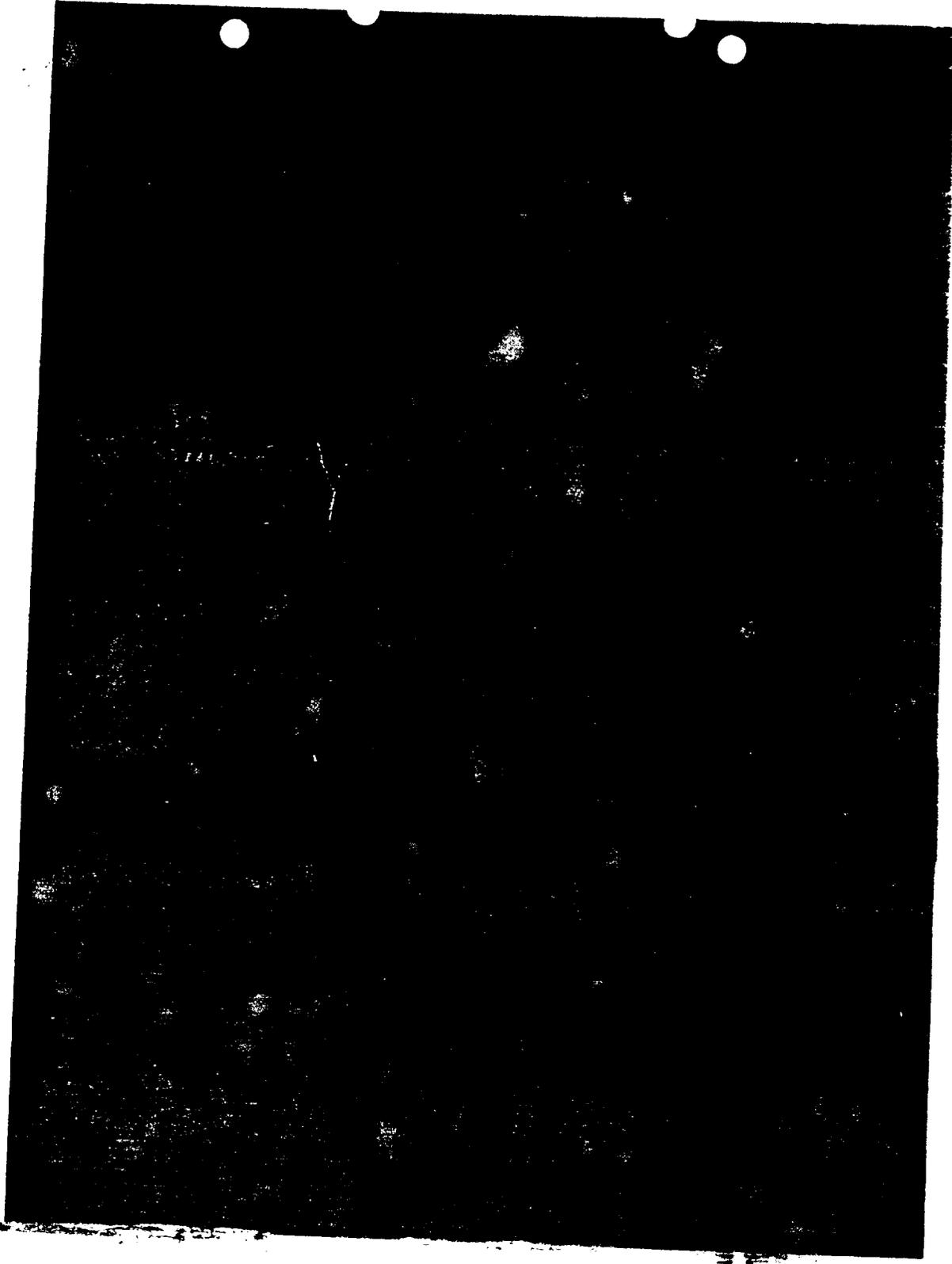
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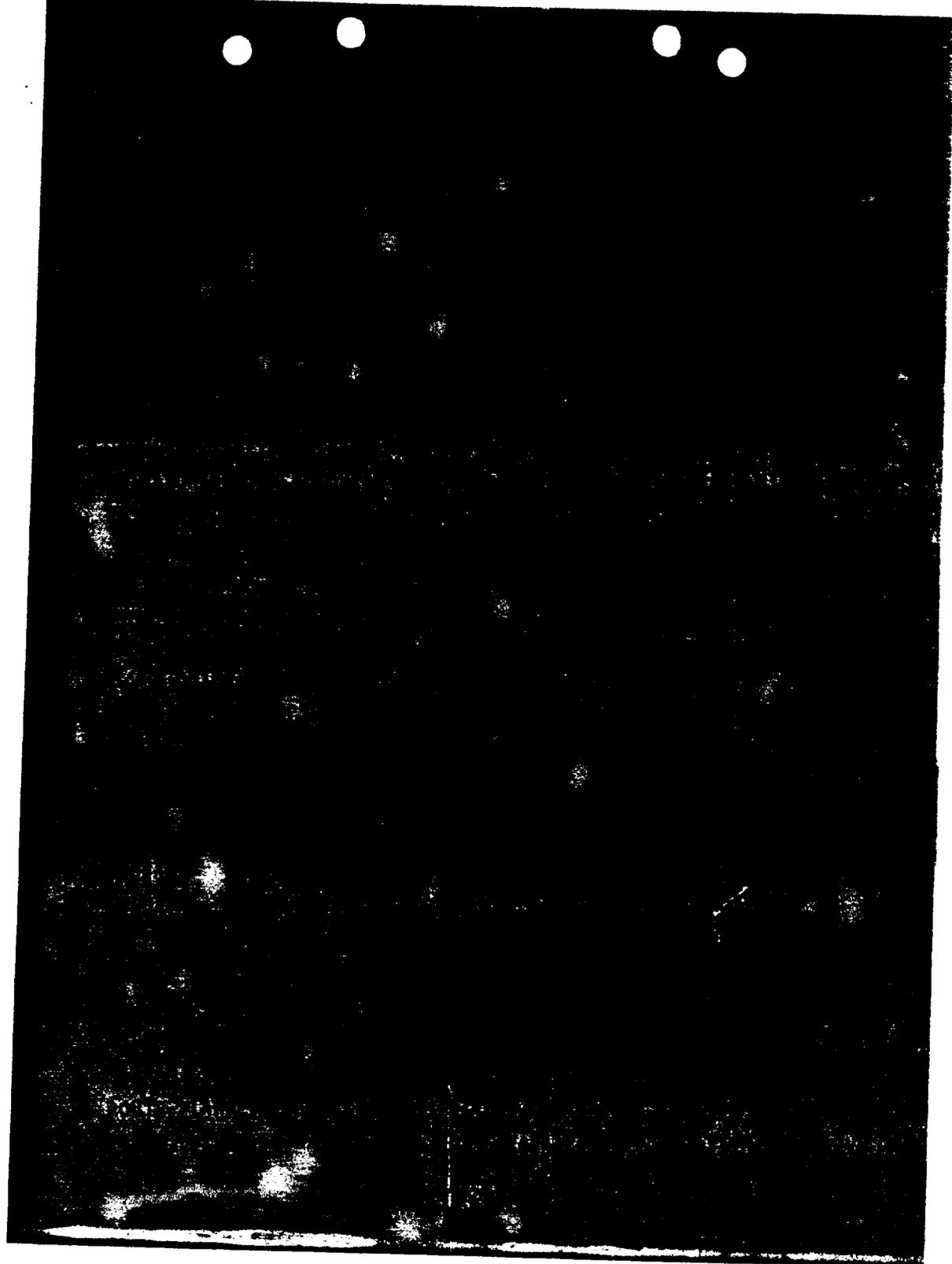
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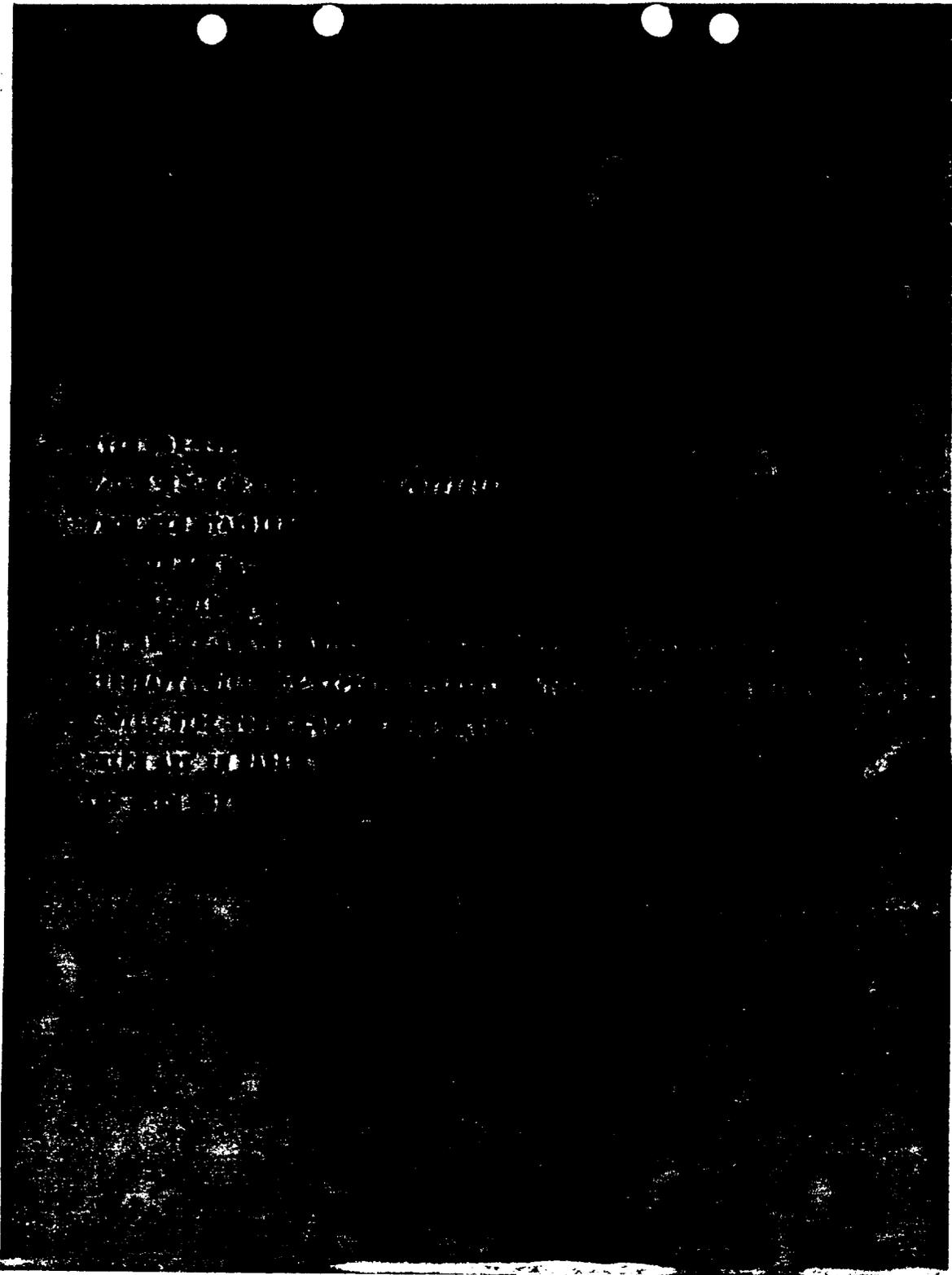
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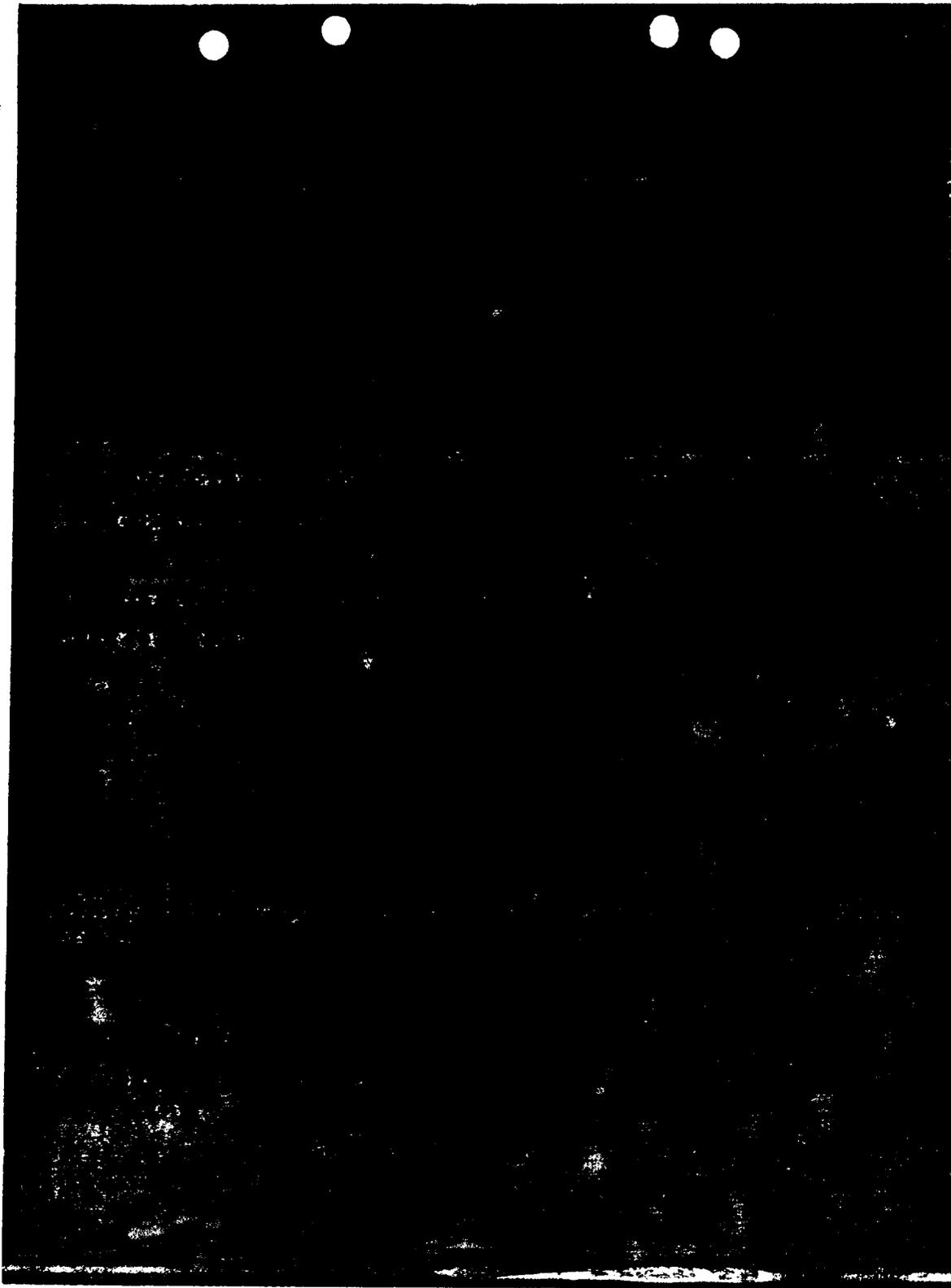
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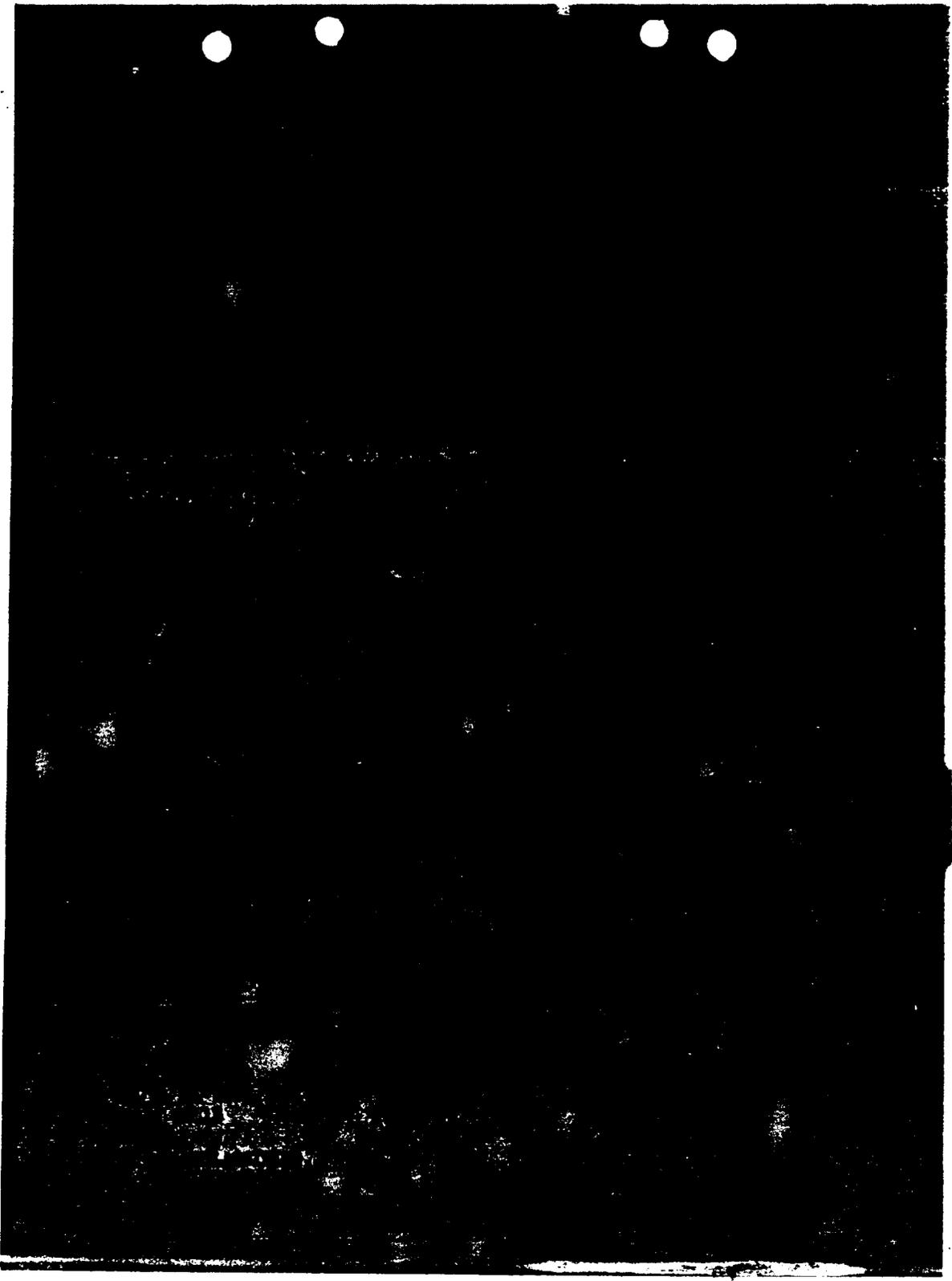
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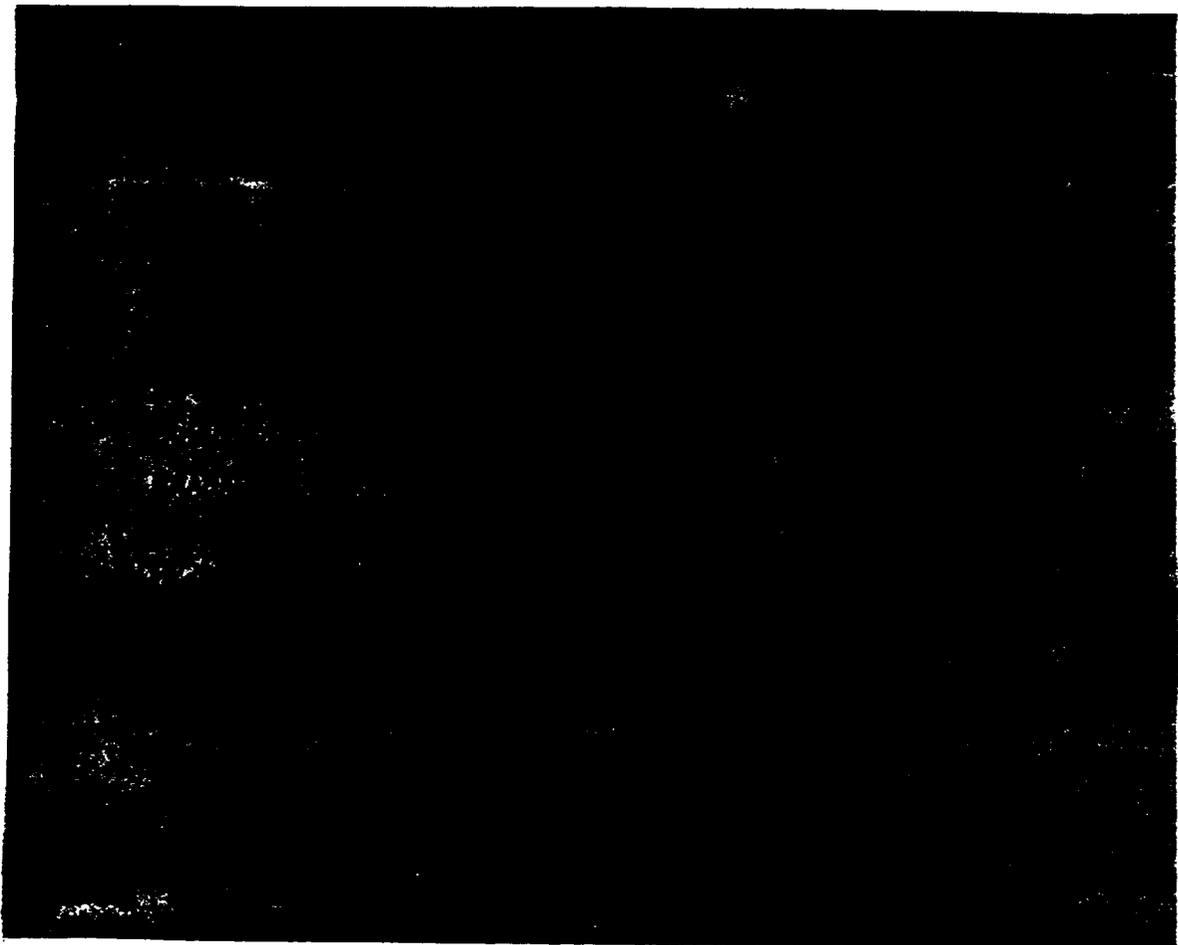
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OR 2444

FOR 240900Z JULY/68

OPERATIONAL IMMEDIATE

240043Z (INFO 232210Z)

FM: AEG WASH DC

TO: CJTF 7 HONOLULU HI // CJTF 7 JOHNSTON ISLAND

INFO: CINCPAC // HQ USAF ATTE AYNESWORTH // SECRET FOR LOPER

(INFO-234)

FOR TIME FROM STARBIRD INFO LUEDDKE.

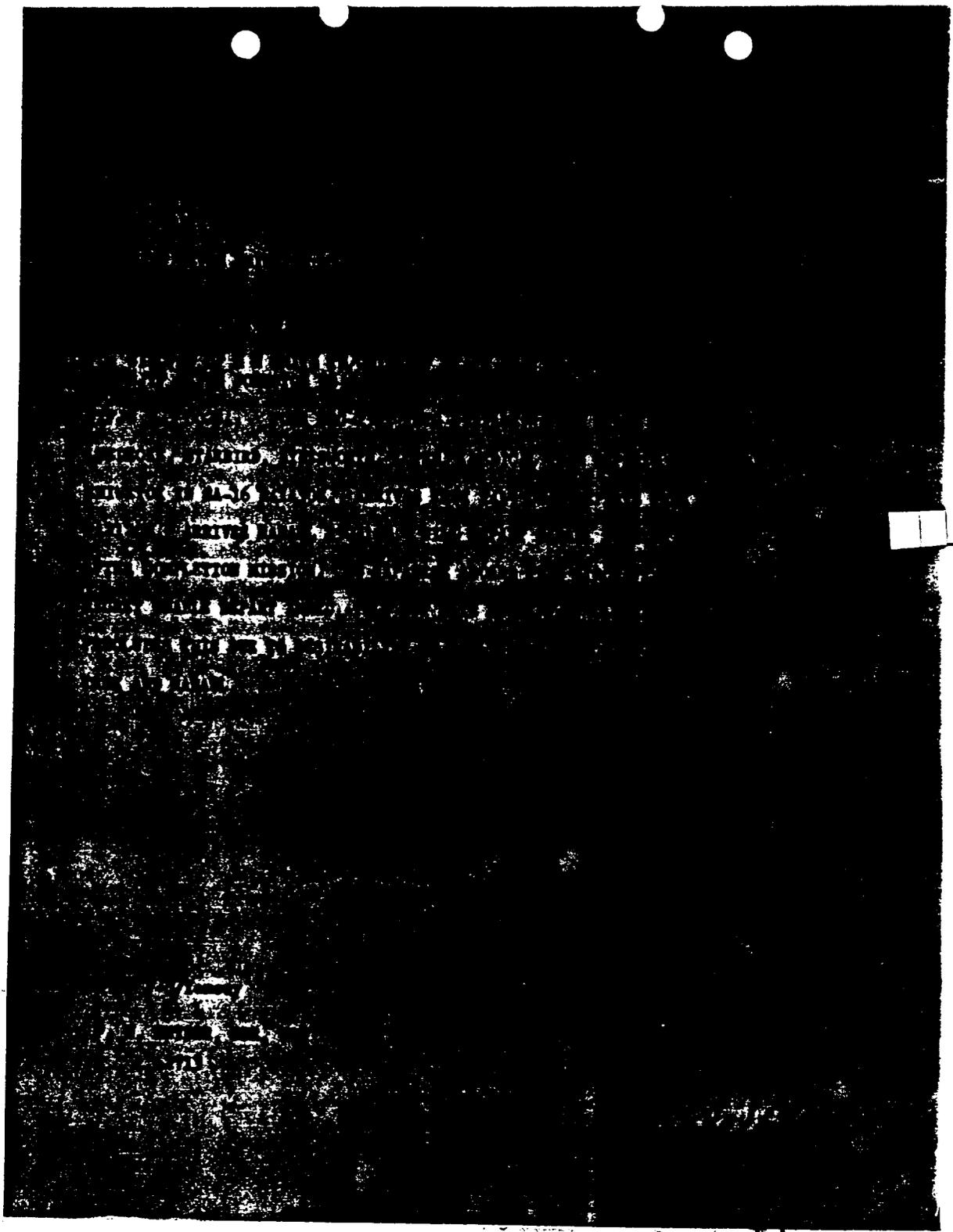
STATE DEPARTMENT ADVISES THAT AMBASSADOR BEALE, AUSTRALIAN AMBASSADOR TO U S, HAS AUTHORIZED ENTRY INTO RABAU OF US AIRCRAFT WITH CREW AND MEDICAL TEAM. YOU ARE HEREWITH AUTHORIZED TO DISPATCH AIRCRAFT IN ACCORDANCE WITH YOUR PLANS AS STATED IN SEVERAL MESSAGES TO ME. BEALE REQUESTS ASSURANCE THAT AIRCRAFT WILL NOT HAVE ANY JAPANESE ABOARD. GOOD LUCK.

ACTION: COMB
INFO: 2-3, 2-4, 2500
LOG NR: 9041

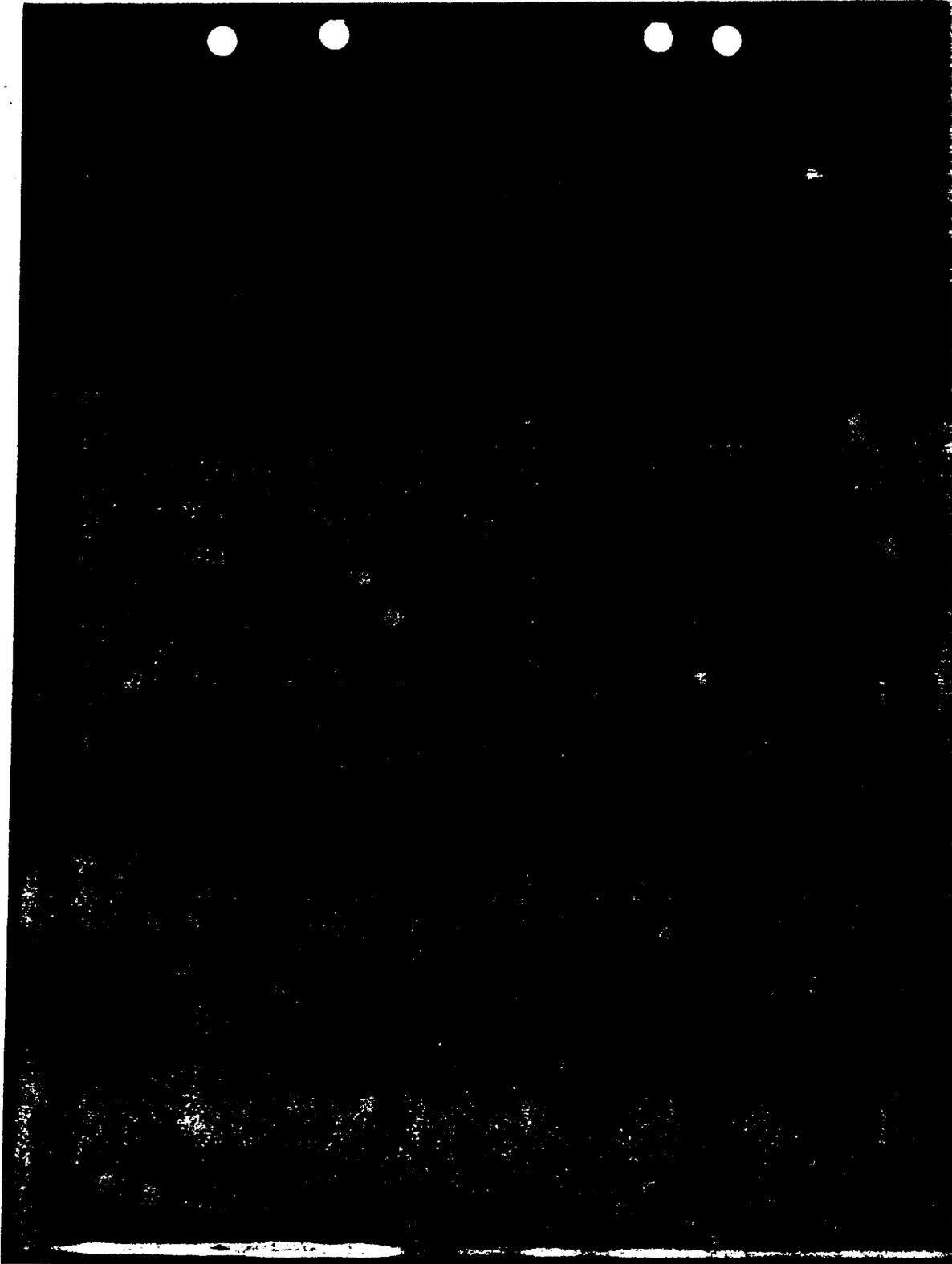
FOR: 24/1515Z July 68

DTG: 240043Z
INFO: 232210Z/MT

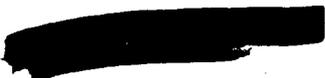
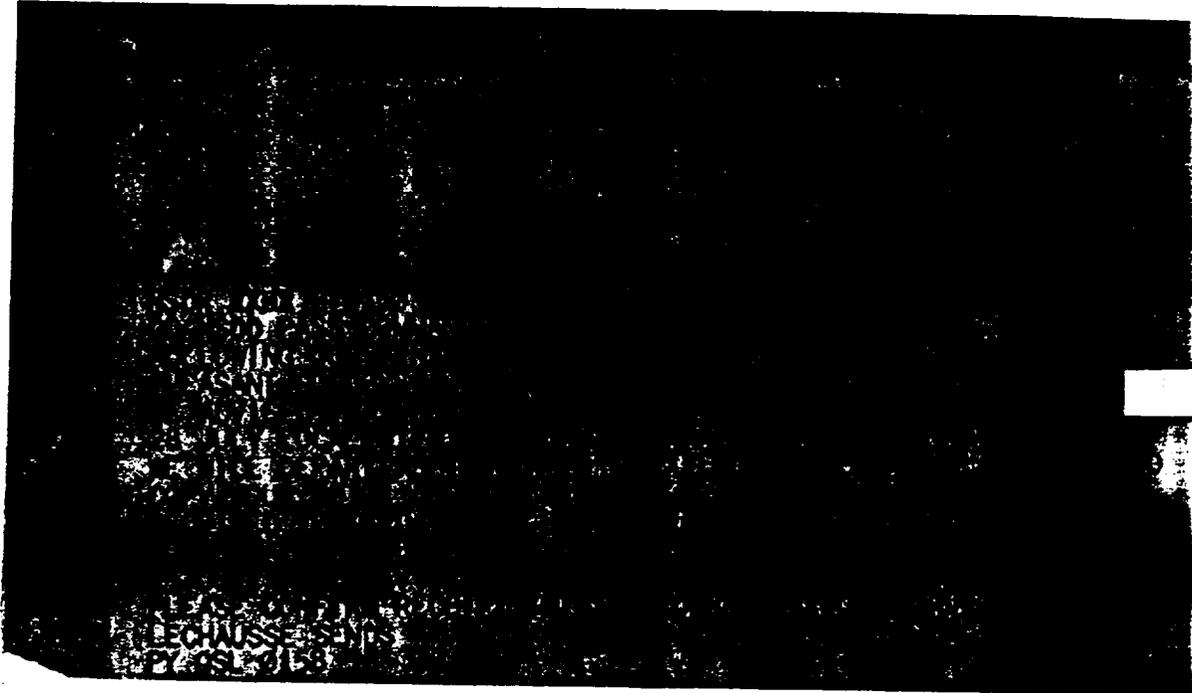
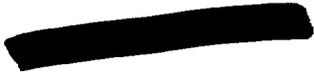
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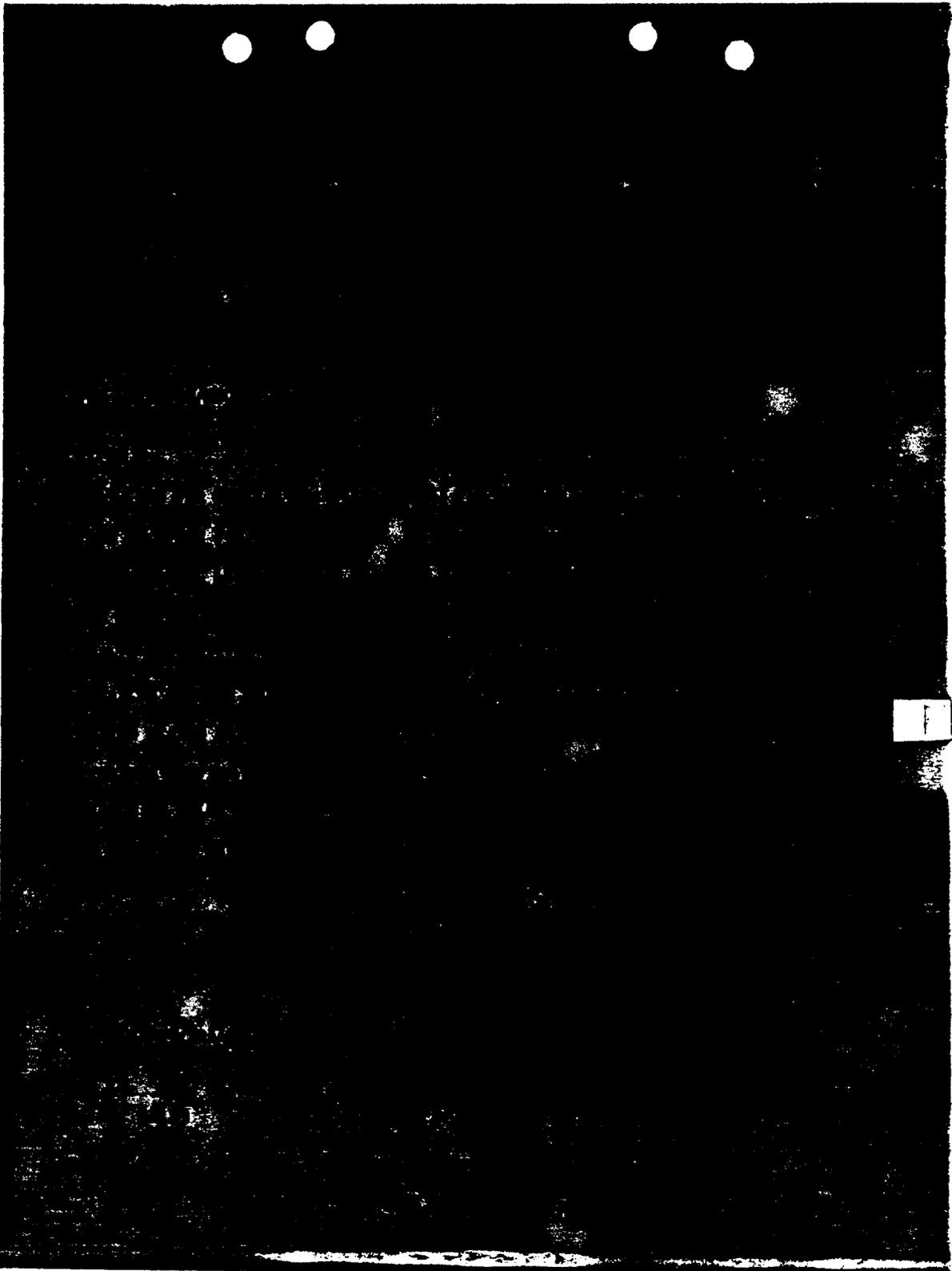
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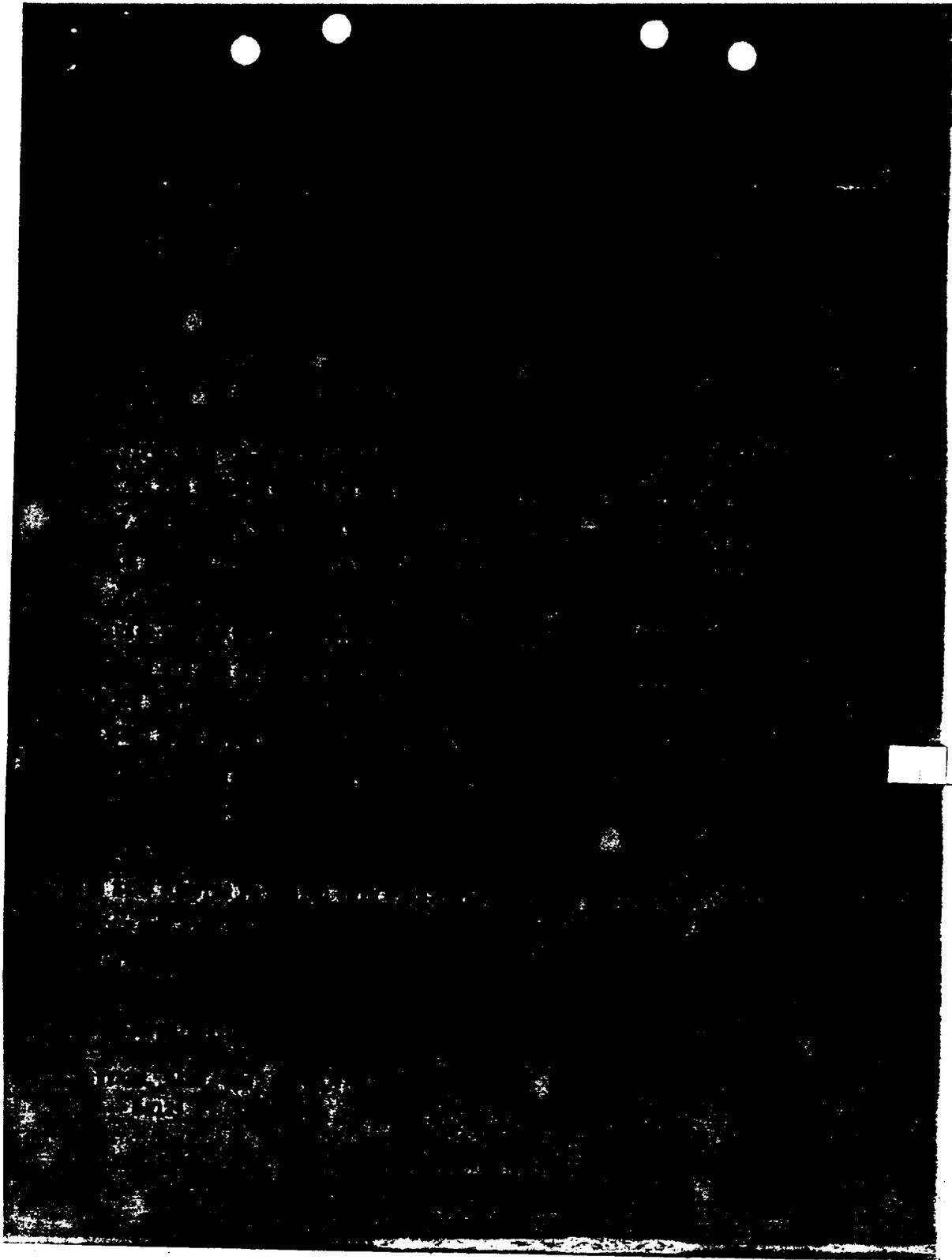
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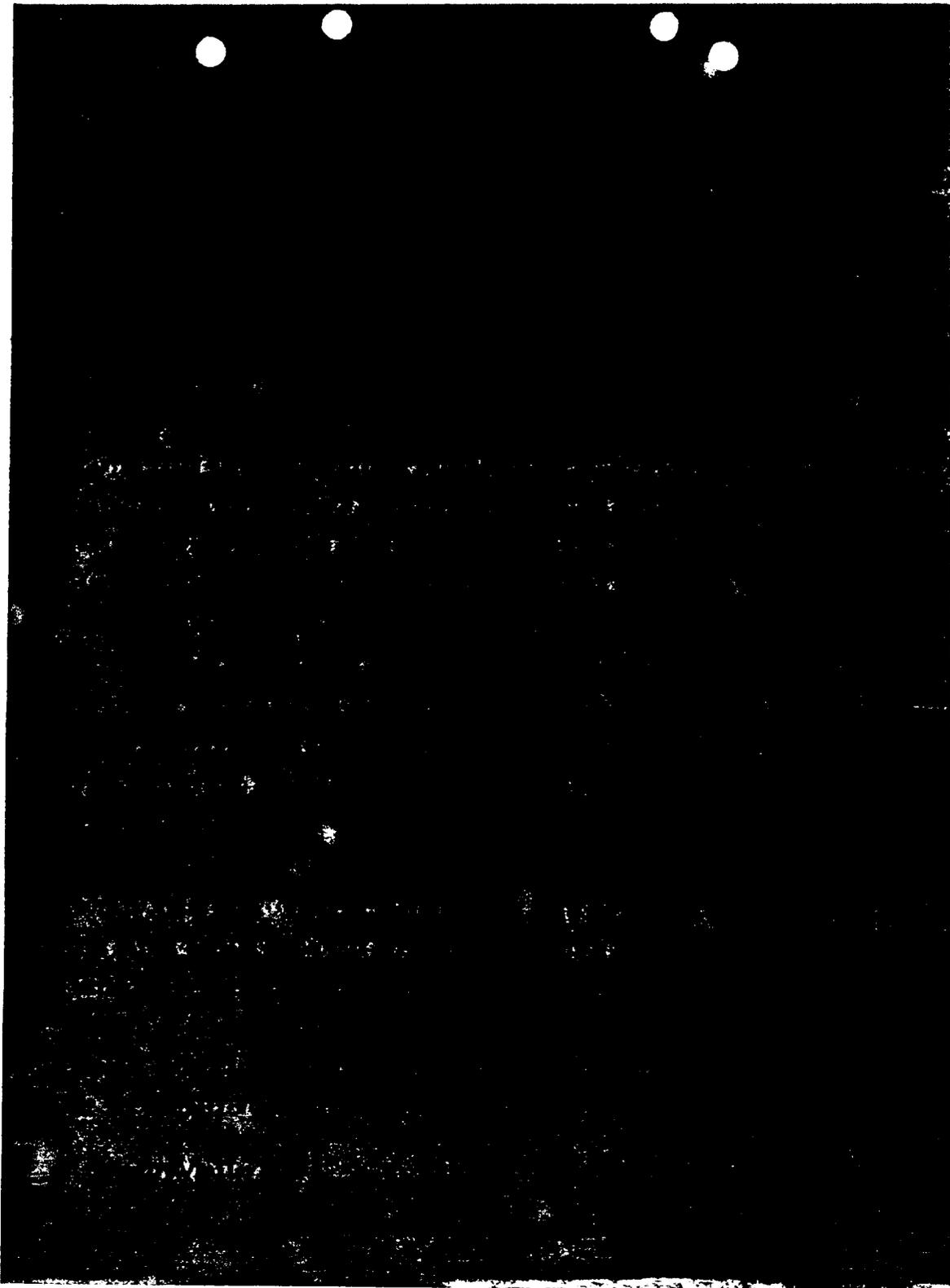
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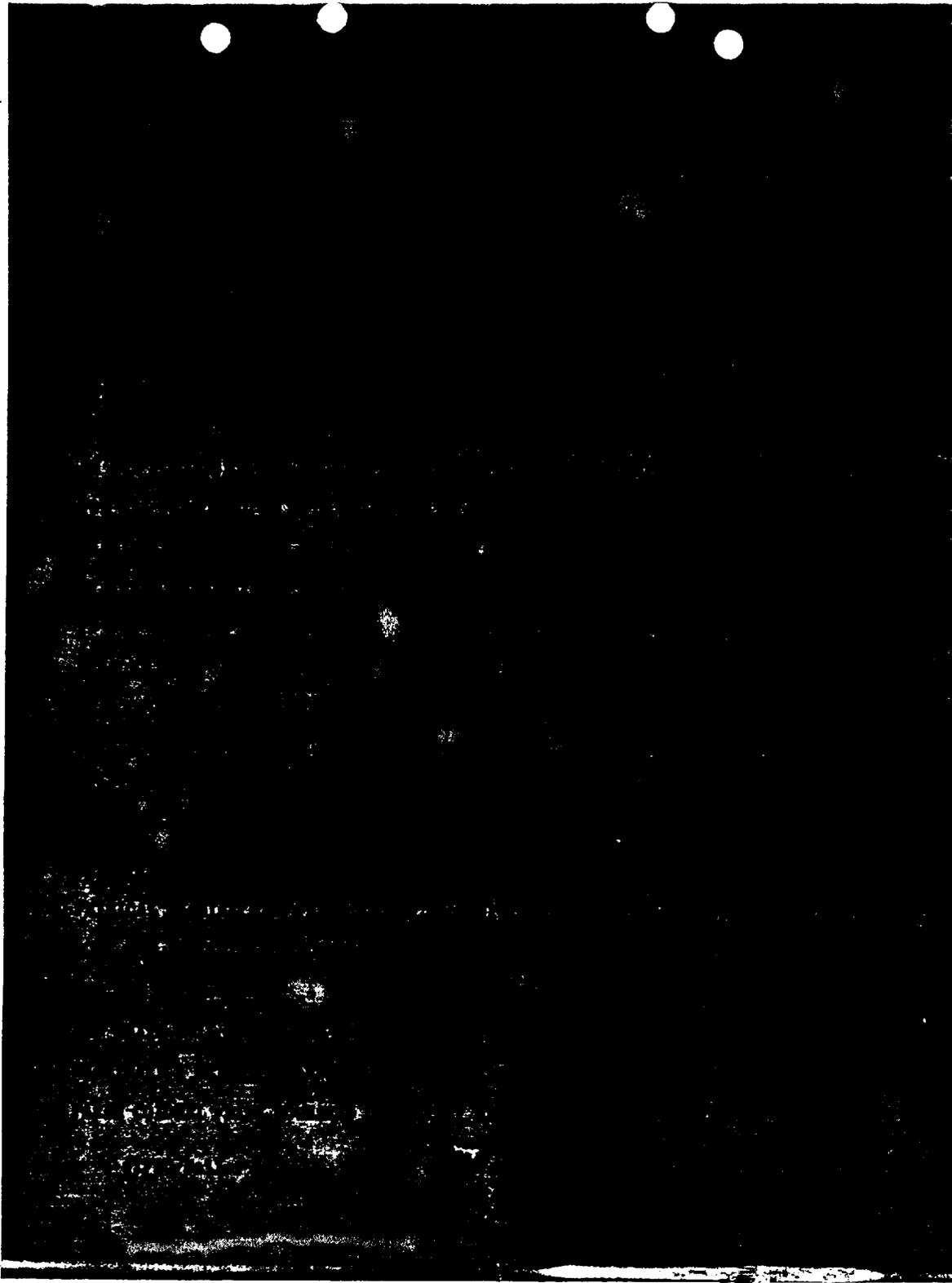
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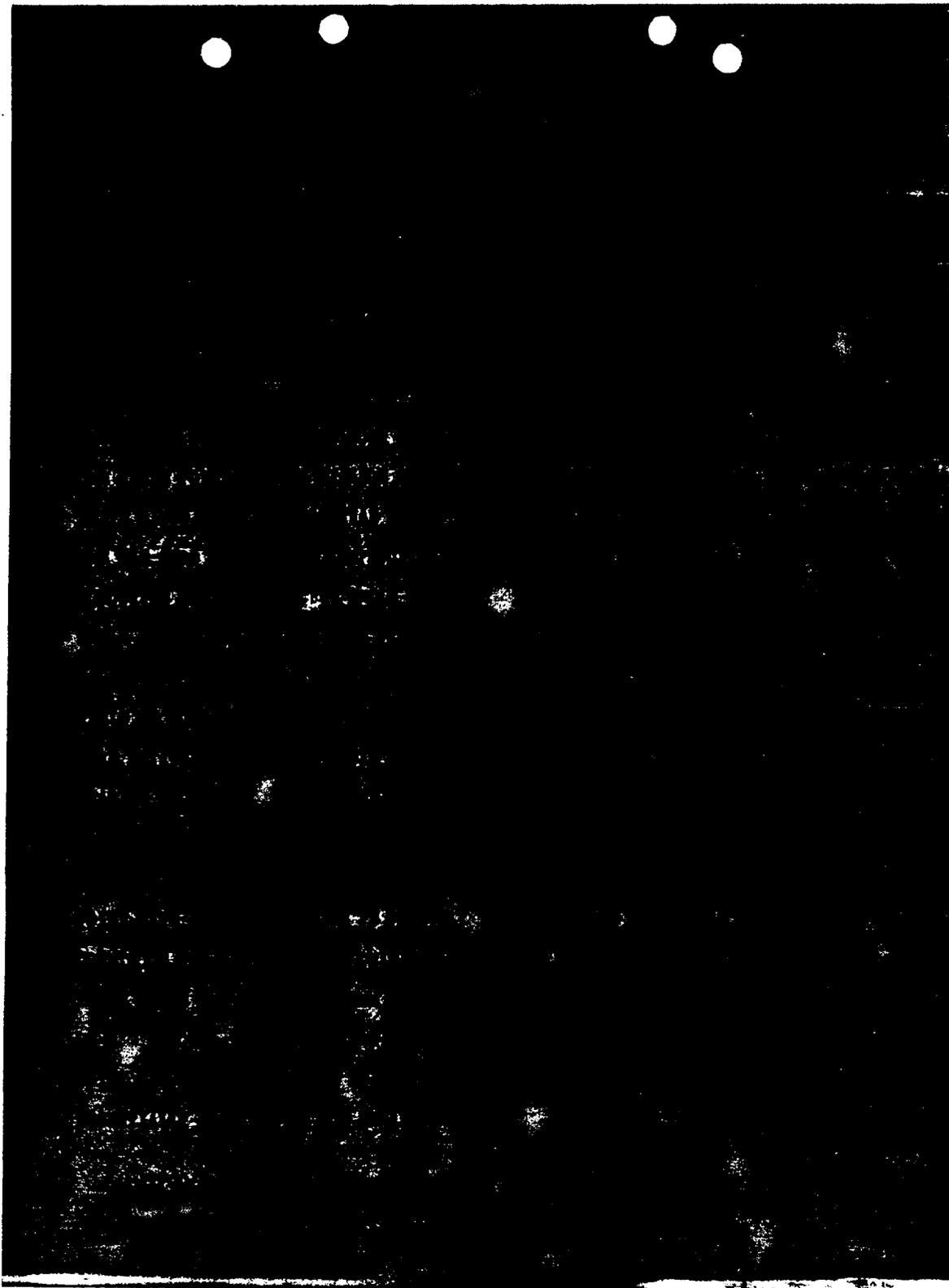
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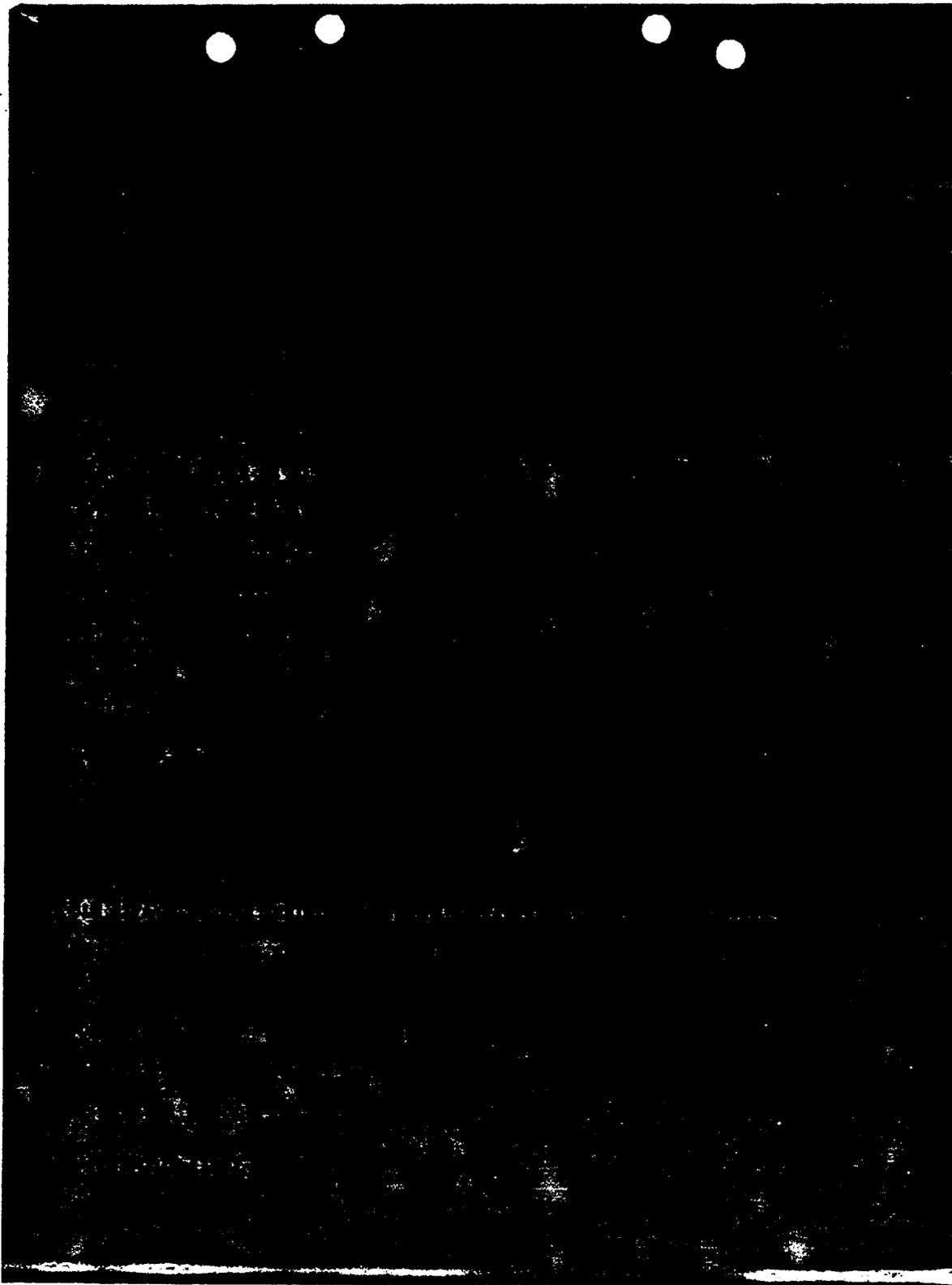
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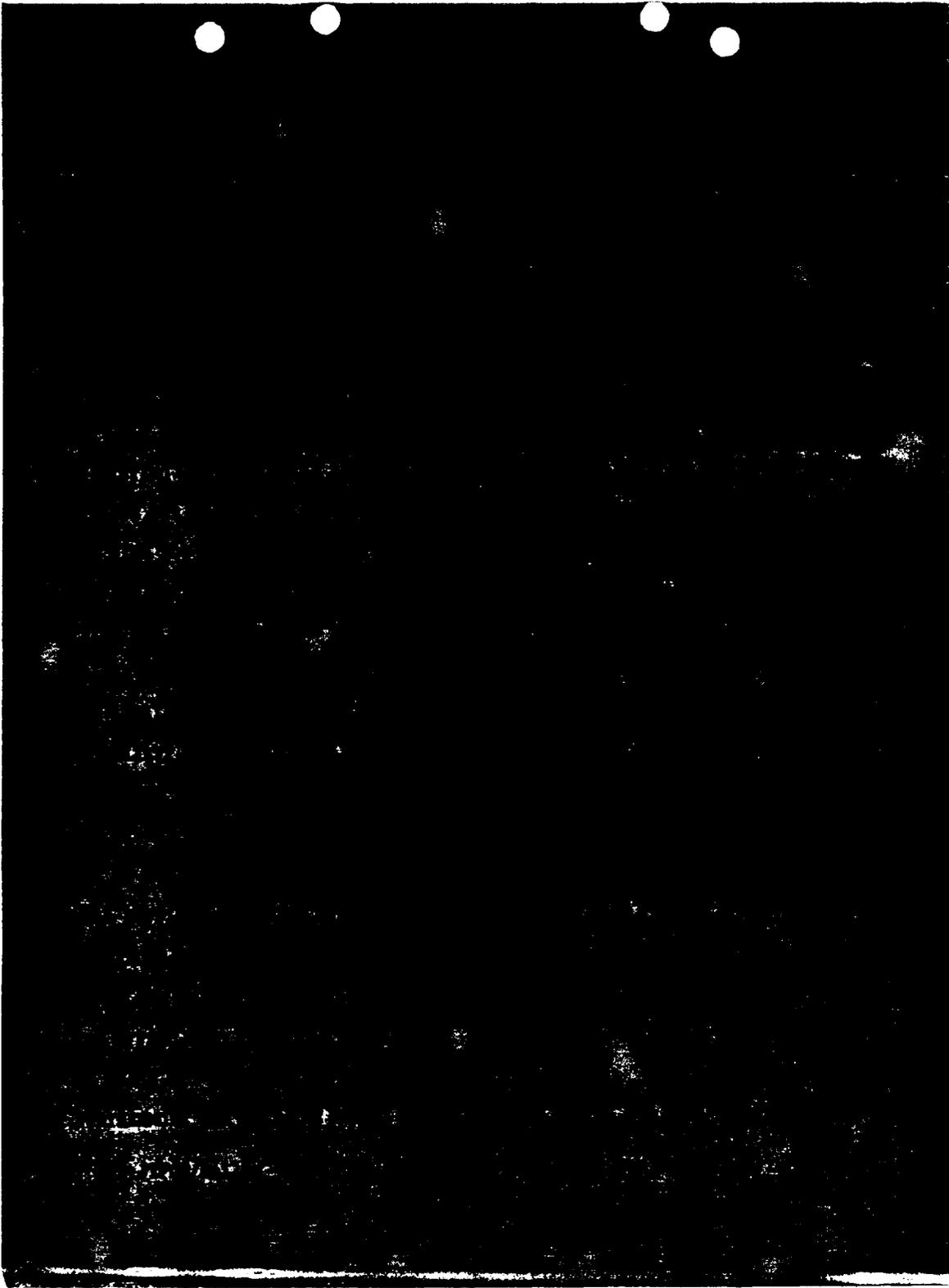
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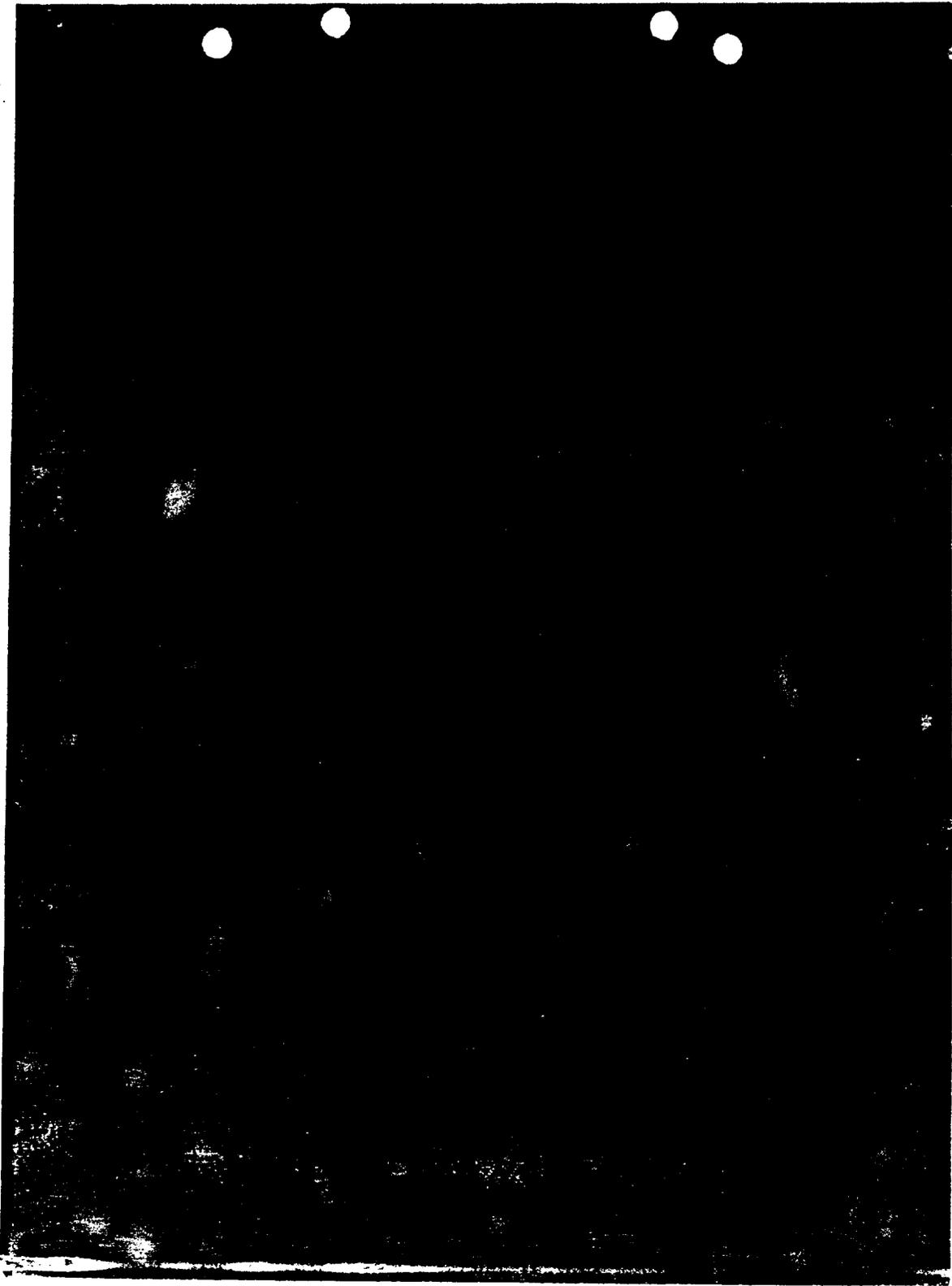
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[REDACTED]

COPY

ITEM NBR 07.

UNCLASSIFIED/OFFICIAL

FROM LOOL McDONNELL

FOR COL LECHAUSSE

**HAVE JUST SEEN THE SUPERB BARAUL MEDICAL REPORT. CONGRATULATIONS ON
A JOB WELL DONE.**

END ITEM NBR 7.

COPY

[REDACTED]

BEST AVAILABLE COPY

... WASHINGTON TOMORROW ...
... ANALYSIS. ALL BEING HANDLED ... STRICT SEC
... AS FOR INST ... CONSLATION WITH ...
... MY IMPRESSION ... MEDICAL REPORT. HE STATES NOTHING WAS LEFT
... AND ON BASIS ... THOROUGH COVERAGE, HE WAS CALLED BY THE LE
... GEORGE LEROY AND ... WERE CHOSEN AS HIS STANDBY COM
... AND ...

BEST AVAILABLE COPY

NO. 10/133
Department of State
Washington, D.C.

Subject: Radio-contaminated Japanese patrol ship

On Saturday, July 19, 1958, at 8 a.m. two Japanese patrol ships of the Japanese Navy on a cartographic survey arrived in Rabaul.

It was reported by the Captain of one of the two ships, the "TAKUYO", that his ship was radio-contaminated.

According to his story, they sailed through the Pacific 500 miles west of the last atom explosion centre in the Caroline Islands; they sailed in the route prescribed by the American high command. The other ship "SATSUMO" sailed about 500 miles west of them. A south-east wind stronger than calculated blew over their heads an atomic cloud. On the "TAKUYO", where they have all equipment such as geiger counter and scintillograph, they noticed about a week ago, at midday, that the ship was radio-active. According to their statement, it was about 70 milli Rountgen. They immediately contacted their headquarters and took precautions - hoses the deck of the ship and cleaned the crew's clothes, etc.

When these ships arrived at Rabaul, I immediately contacted you and, after our radio conversation, we took the geiger counter from the ship to the Customs shed corner, where it registered 24 times per minute; on the deck of the ship the same instrument registered 29 times per minute.

The doctor of the ship reported that, according to his opinion, two members of the crew were affected. We took 7 members for blood testing and from the 7, 3 had counts lower than 5000 leucocytes. For control we took 7 members of the other ship's crew, where we found two members had a count lower than 5000 as well.

Today we have tested the crews of both ships and the results are attached. We are also enclosing the scintillograph reports from the ships, which was contaminated.

According to the statements of the Captain, the "SATSUMO" was not contaminated and their instruments did not show radio-activity.

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I have to emphasize here that owing to interpretation difficulties, some of these statements may be incorrect. We have only one Japanese here whose English is more or less understandable; unfortunately, the educated members of the ship's crew speak only very poor English. I failed, alas, to make contact in other languages.

Unfortunately, when we took the geiger counter to the Customs shed the press reporter arrived and he saw these activities and, so, the news spread quite speedily through Rabaul and further afield.

In accordance with your instructions, the ship was not put in quarantine and the crew were free to move about; but I recommended the people not to go on board the "TAKUYO", in

REPORT

TO QUARANTINE OFFICE

J. C. G. S. "TAKUYO"

THE VALUES OF SCINTILLATION COUNTER AT THE LEFT SIDE OF
BRIDGE FROM 19TH TO 21ST

19TH	7.00 AM	10.500	c.p.m.
	2.00 PM	9.200	c.p.m.
	6.00 PM	7.550	c.p.m.
20TH	7.00 AM	7.900	c.p.m.
	NOON	7.860	c.p.m.
21ST	10.00AM	5.000	c.p.m.

BEST AVAILABLE COPY

to avoid any mishap.

C. Hassler, Medical Officer,
A/Regional Medical Officer,
New Guinea Islands.

BEST AVAILABLE COPY

COMPARATIVE BLOOD COUNTS OF THE FIRST 14 SEAMEN
FROM THE TWO SHIPS

"TAKUYO"

19.7.58

1. W.B.C. 9,500
2. 10,300
3. 6,000
4. 9,700
5. 3,850
6. 4,350
7. 3,350

21.7.58

5,650
4,450
6,800
8,150
4,150
4,200
3,550

"SATSUMO"

1. 5,500
2. 5,500
3. 5,600
4. 6,150
5. 4,600
6. 3,500
7. 5,600

10,950
10,200
6,800
8,300
3,900
6,650
6,250

BEST AVAILABLE COPY

Identical with last copy

PATHOLOGY REPORTS FOR JAPANESE COAST GUARD SHIP "TAKUYO" 21/7/58

PRIVACY ACT MATERIAL REMOVED

NAME	W. B. C.	URINE FOR ALBUMI
	6,800	Nil
	8,150	"
	5,650	"
	4,150	"
	4,450	"
	4,200	"
	3,550	"
	3,550	"
	5,050	Trace
	4,500	Nil
	6,350	"
	5,800	"
	3,750	Trace
	12,100	Nil
	3,700	Trace
	8,000	Nil
	8,000	"
	7,600	"
	8,200	Trace
	7,400	Nil
	8,000	"
	4,850	"
	7,000	"
	6,350	"
	8,300	"
	6,000	"
	8,800	"
	8,500	"
	8,000	"
	4,240	"
	7,500	"
	9,000	"
	7,900	"
	4,450	"
	10,000	"
	8,200	"
	4,350	"
	7,250	"
	7,450	"
	8,000	"
	9,200	"
	10,100	"
	9,100	"
	8,100	"
	7,250	"
	8,000	"
	8,200	"

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PRIVACY ACT MATERIAL REMOVED

<u>NAME</u>	<u>W.B.C.</u>	<u>URINE FOR ALBUMIN</u>
	8,100	N11
	8,300	"
	8,600	"

.....

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PATHOLOGY REPORTS OF JAPANESE COAST GUARD S.S. "SATSUMO" 21.7.58

NAME	WB.C.	URINE FOR ALBUMIN
	10,950	Nil
	6,250	"
	8,300	"
	6,650	"
	3,900	"
	10,200	"
	6,800	"
	5,750	"
	5,100	"
	8,800	"
	8,600	"
	10,400	"
	10,000	"
	7,200	"
	9,400	Trace
	11,000	Nil
	8,400	"
	8,400	"
	8,100	"
	8,300	"
	5,800	"
	8,100	"
	7,700	"
	4,650	"
	4,000	"
	6,200	"
	5,400	"
	11,900	"
	8,000	"
	5,000	"
	4,350	"
	9,000	"
	5,150	"
	7,100	"
	5,600	"
	6,200	Trace
	5,100	Nil
	6,300	"
	8,300	"
	10,300	"
	6,300	"
	6,900	"
	6,100	"
	4,550	"
	4,500	"
	6,900	"
	6,600	"

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<u>NAME</u>	<u>H. B. C.</u>	<u>URINE FOR ALBUMIN</u>
	7,250	N11
	6,600	"
	6,250	"
	9,400	"
	9,800	"
	6,300	"
	8,500	"
	5,650	"
	8,200	"
	7,900	"
	8,000	"
	8,200	"
	8,000	"
	8,300	"
	9,100	"

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PRIVACY ACT MATERIAL REMOVED

PATHOLOGY REPORTS FOR BLOOD TAKEN ON 21/7/58

<u>NAME</u>	<u>W.B.C.</u>	<u>M.</u>	<u>E.</u>	<u>B.</u>	<u>M.</u>	<u>L.</u>
	3,550	54	3	-	6	37
	3,750	41	3	1	8	47
	3,700	64	1	-	2	33
	4,000	61	6	-	5	28

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PRIVACY ACT MATERIAL REMOVED

REPORTS FOR SATURDAY 19th July, 1956

NAME	Hb.	W. B. C.	N.	E.	B.	M.	L.
	102%	9,500	61	4	-	5	30
	84%	10,300	52	2	-	5	41
	100%	6,000	56	5	2	9	28
	98%	9,700	65	8	-	4	23
	98%	3,850	65	6	1	5	23
	92%	4,350	57	1	-	5	34
	96%	3,350	56	4	-	6	34

"SATSUMO"

114%	5,500
94%	5,500
96%	5,600
94%	6,150
100%	4,600
90%	5,350
86%	5,600

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On 14th July 1958, about 1100 miles from Rabaul

11.30 a.m. noticed radioactivity coming by the
scintillograph. (A normal counting reads
2,400)

Radioactivity rose to 3,600 - squall coming (8p.m.)

8.16pm radioactivity at 35,000

8.30pm rain stopped

10pm maximum count of radioactivity at 37,000 c.p.m.

Of the 51 members of the crew, two were chosen at
random and tested for radioactivity. These two had
low blood counts. There was definitely no sickness
in the crew whatsoever.

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NBD 3/4/1410

Department of Public Health,
RABAU.

July 24, 1958.

Director,
Department of Public Health,
PORT MORESBY.

Subject: Additional Report on radiation
contaminated Japanese vessel.

My NBD 3/4/1378 of July 21, 1958, refers.

On July 22, 1958, at 3 p.m., accompanied by Sub-Inspector Stewart of the Police Department, I interviewed the officers of the "TAKUYO" regarding further details and clarification on some points.

Sub-Inspector Stewart was, after the War, stationed in Japan for a long period and has some practical knowledge of the Japanese language.

We found also from the "SATSUMO" one officer with practicable English and with the help of the two officers, we could gather information regarding the accident.

"TAKUYO" was making routine checks for radiation daily. The ship is equipped with a geiger counter and scintillograph.

On July 13, 1958, the sky was slightly overcast and a strong south-east wind was blowing.

On July 14, 1958, about 1,100 miles from Rabaul, at 11.30a.m. they noticed that the counting per minute on the scintillograph was 3,600 (the normal counting is 2,400). At 8 p.m. a squall hit the ship and at 8.16p.m. the scintillograph showed 35,000 counts per minute. At 8.30 the rain stopped. At 10p.m. the maximum count of radio activity was recorded at 37,000 counts per minute.

Tokyo was contacted as soon as possible and the ship was advised to leave the area at the highest speed possible. They were also advised on how to clean the ship with a neutral cleaner. Radiation was mainly observed on the deck of the ship but was also observed in a small quantity below the deck. Rooms below the deck were cleaned on July 15, 1958. Clothes of the crew, canvas, etc., were also washed and checked. At Rabaul, a haircut for each member of the crew was ordered and carried out.

Regarding the evaluation of the counting I have been advised by the specialised officers of the ship that the geiger counter normal values are between 23 and 50 per minute. Scintillation count is 2,400 per minute normally.

On July 22, 1958, the scintillograph counted, on the deck, only 2,000 per minute.

As far as I can ascertain, the ship was instructed from Tokyo that 500 scintillograph counts per minute are equal with radiation of 0.7 miliroentgen. 36,000 scintillations would mean 42 miliroentgens per week. They were advised that this was not a dangerous dose.

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It was mentioned by the Captain that according to his knowledge 100 miliroentgens per day and 300 miliroentgens per week were not a dangerous amount of radiation.

Regarding the medical side of the interview, the Doctor of the ship stated that on the 15th and 18th July, he chose ten members of the crew at random and checked their leucocytes. When the ship arrived at Rabaul, he was of the opinion that two crew members may possibly have been affected as they had low counts. He asked for further investigation to be carried out. He stated that no member of the crew has since complained of dizziness, nausea, vomiting or loss of appetite. The only skin condition was sunburn, which occurred both before and after the accident. No loss of hair was observed and no general medical complaints reported.

In the second part of this interview, Mr. Poldi, District Commissioner, was present.

On July 23, 1958, two sailors - _____ and _____ of the "TAKUYO" were seen at the Town Clinic.

(B.p.110/70) complained that at 5 a.m. on July 23 he felt dizzy with slight nausea. He complained of pain in the lower abdomen, slight headache and weariness. On examination, no clinical signs could be found. Pathological tests were carried out with full blood picture, urine and stool examination. No positive findings were made. (See attached reports).

(B.p.120/70) complained that on July 22 at 1 p.m. he became sick, felt giddiness, dryness of the mouth and lips and feverish. On examination, only slight sensitiveness could be felt on palpation in the right upper abdomen in the liver area. In the urine no bile salts were detected. The Japanese Doctor claimed that according to his examinations, Urobilinogen was 1 + positive. Pulse was 70; temperature 97.6. Our examination did not disclose any other physical signs.

To the examination of these two sailors, I asked the cooperation of Dr. Topham, and he agreed with me about the negativity of the clinical symptoms.

Please find attached, the following:

1. Reports on _____ and _____
2. Total white cell count on the crew of "SATSUMO".
3. Differential count reports on ten members of the "TAKUYO" and one member of the "SATSUMO".
4. The results of the fourteen first examined crew members seen on July 20, 1958.

C. Hassler,
A/Regional Medical Officer,
New Guinea Islands.

ENCLS.

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PRIVACY ACT MATERIAL REMOVED

LABORATORY REPORT

Received: 23.7.58

Name:

Specimen: ^Urine

Physician: Dr. Haszler

Specific Gravity: 1.022

Colour: Amber

Albumin: Not detected

Sugar: Not detected

MICRO:

Pus cells: 3-7 per high power field

R.B.C.'s nil per high power field

Squamous epithelial cells: Numerous

Mucus threads: +

Crystals: Nil

Casts: Not seen

Other abnormalities: No bile salts detected.

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PRIVACY ACT MATERIAL REMOVED

LABORATORY REPORT

Received: 10.7.8

Name:

Specimen: Urine

Physician: Dr. [unclear]

MIK:

Reaction: [unclear]

Specific gravity: 1.018

Colour: Straw

Albumin: Not detected

Sugar: Not detected

MICRO:

Pus cells: 6-10 per high power field

R. C. 's Nil per high power field

Stratified epithelial cells: Few

Leucocytes: -

Crystals: Nil

Casts: Not seen

Other abnormalities: No bile salts detected.

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LABORATORY REPORT

Received: 23.7.58

Name:

Specimen: Blood

Physician: Dr. Haszler

Hb. 10.4% (100% = 11.5 grms)

Total R.B.C.'s 4,990,000 per cmm.

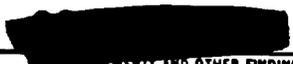
Colour Index 1.0

Total leucocytes 3,450 per cmm.

Neutrophils	59%
Eosinophils	4%
Basophils	-%
Monocytes	6%
Lymphocytes	29%

Remarks: Cells normal in appearance.

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				86. TEMPERATURE									
87. BLOOD PRESSURE (Δ mm of Hg syst. diast.)						88. PULSE (Δ mm of Hg syst. diast.)															
A. SITTING		B. SECUR- BENT		C. STANDING (8 min.)		D. BITTERS		E. AFTER EXERCISE		F. 2 MIN. AFTER		G. RECURRENT 3 MIN.									
SYST. DIAST.		SYST. DIAST.		SYST. DIAST.		SYST. DIAST.		SYST. DIAST.		SYST. DIAST.		SYST. DIAST.									
89. DISTANT VISION		90. REFRACTION						91. NEAR VISION													
RIGHT 20/ CORR. TO 20/ LEFT 20/ CORR. TO 20/		BY		S.		CX		CORR. TO		BY		BY									
92. METROPOLIA (<i>Specify distance</i>)																					
RS°		EX°		S. N.		L. N.		PRISM DIV.		PRISM CORV.		PC PD									
93. ACCOMMODATION						94. COLOR VISION (<i>Test used and result</i>)				95. DEPTH PERCEPTION (<i>Test used and score</i>)		UNCORRECTED									
RIGHT LEFT												CORRECTED									
96. FIELD OF VISION						97. RIGHT VISION (<i>Test used and score</i>)				98. RED LENS TEST		99. INTRAOCULAR TENSION									
RIGHT LEFT																					
70. HEARING						71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (<i>Test used and score</i>)									
RIGHT WV		/10 BV		/10		250 250		500 518		1000 1024		2000 2048		4000 4096		8000 8144		8000 8192			
LEFT WV		/10 BV		/10		RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT					
73. NOTES (<i>Continued</i>) AND SIGNIFICANT OR INTERVAL HISTORY																					

Using beta-gamma survey meter MI-5, background reading .03-.06 mr/hr. No radioactive contamination found.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnoses with item numbers*)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (<i>Specify</i>)												76. A. PHYSICAL PROFILE											
												P		U		L		M		E		S	
77. EXAMINEE (<i>Check</i>)												B. PHYSICAL CATEGORY											
A. <input type="checkbox"/> IS QUALIFIED FOR												A											
B. <input type="checkbox"/> IS NOT QUALIFIED FOR												B											
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER												C											
												D											
												E											
79. TYPED OR PRINTED NAME OF PHYSICIAN												SIGNATURE											
CARL L. HANSEN, Lt Col, USAF, MC-73																							
80. TYPED OR PRINTED NAME OF PHYSICIAN												SIGNATURE											
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (<i>Indicate which</i>)												SIGNATURE											
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY												SIGNATURE						NUMBER OF AT- TACHED SHEETS					

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Standard Form 88
(Rev. June 1956)

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OF POSITION		3. IDENTIFICATION NO.		
4. HOME ADDRESS (Number, street or R.F.D., city or town, state and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION		
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE		10. AGENCY	11. ORGANIZATION UNIT		
		MILITARY		CIVILIAN		26 Jul 58	
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN			
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION			
17. RATING OR SPECIALTY				TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

CLINICAL EVALUATION		APPROX. AGE
(Check each item in appropriate column; enter "NE" if not evaluated.)		
X	18. HEAD, FACE, NECK, AND SCALP	
X	19. NOSE	
X	20. SINUSES	
X	21. MOUTH AND THROAT	
X	22. EARS—GENERAL (See 8 and 9; specify if military service under items 70 and 71)	
X	23. EARS (Perforation)	
X	24. EYES—GENERAL (Specify any and refer to major items 25, 26 and 27)	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Assess total eye movements)	
X	28. LUNGS AND CHEST (Include breasts)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Varicosities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulas, prostates, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Specify items under item 70)	
	42. PSYCHIATRIC (Specify any personality disorders)	
	43. PELVIC (Females only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES			
O—Restorable teeth /—Nonrestorable teeth X—Missing teeth XXX—Replaced by dentures (X X X)—Fixed bridge, brackets to include abutments																			
U	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L		
O	22	21	20	29	28	27	26	25	24	23	22	21	20	19	18	17	E		
M																	F		
T																	T		

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN		D. MICROSCOPIC	
C. SUGAR		48. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result)		49. OTHER TESTS	

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MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT		52. WEIGHT		53. COLOR HAIR		54. COLOR EYES		55. BUILD. <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				56. TEMPERATURE													
57. BLOOD PRESSURE (Apm of heart level)						58. PULSE (Apm of heart level)																			
A. SITTING		B. RECUMBENT		C. STANDING (5 min.)		4. SITTING		5. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT													
SYS. 126		DIAS. 84																							
59. BINARY VISION						60. REFRACTION						61. HEAR VISION													
RIGHT 20/		CORR. TO 20/		BY		A.		OK		CORR. TO															
LEFT 20/		CORR. TO 20/		BY		A.		OK		CORR. TO															
62. METEOROPHOBIA (Specify distance)																									
ES°		EX°		R. N.		L. N.		PRISM DIV.		PRISM CONV.		PC													
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)				UNCORRECTED													
RIGHT												CORRECTED													
LEFT																									
66. FIELD OF VISION				67. NIGHT VISION (Test used and score)				68. RED LENS TEST				69. INTRAOCULAR TENSION													
70. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)															
RIGHT MV		/10 BV		/15		250		500		1000		2000		3000		4000		5000		6000		7000		8000	
LEFT MV		/15 BV		/15		500		1000		2000		3000		4000		5000		6000		7000		8000			
						RIGHT																			
						LEFT																			

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

Using beta-gamma survey meter MI 5, background reading .03-.06 mr/hr. No radioactive contamination found.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

77. EXAMINEE (Check)
 A. IS QUALIFIED FOR
 B. IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN CARL L. HANSEN, Lt Col, USAF, MC-FS		SIGNATURE	
80. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE	
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)		SIGNATURE	
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY		SIGNATURE	

76. A. PHYSICAL PROFILE

P	U	L	H	E	B

B. PHYSICAL CATEGORY

A	B	C	E

BEST AVAILABLE COPY

Standard Form 88
(Rev. June 1956)

REPORT OF PHYSICIAN

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or R.F.D., city or town, county and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE		10. AGENCY	11. ORGANIZATION UNIT
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION	
17. RATING OR SPECIALTY			TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

26 Jul 58

CLINICAL EVALUATION		ABNORMAL
<i>(Check each item in appropriate column; enter "NE" if not evaluated)</i>		
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL <i>(See 8 and 9; describe laboratory directly under items 20 and 21)</i>	
<input checked="" type="checkbox"/>	23. DRUGS (Paraphen)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL <i>(Visual acuity and refraction under items 25, 26 and 27)</i>	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY <i>(Unassisted parallel and convergent movements)</i>	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breasts)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Varicosities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM <i>(Hemorrhoids, prolapse, fissures, if indicated)</i>	
	33. ENDOCRINE SYSTEM	
	34. G.U. SYSTEM	
	35. UPPER EXTREMITIES <i>(Strength, range of motion)</i>	
	36. FEET	
	37. LOWER EXTREMITIES <i>(Strength, feet)</i>	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC <i>(Excludes items under item 38)</i>	
	42. PSYCHIATRIC <i>(Excludes items under item 38)</i>	
	43. PELVIC (Females only) <i>(Check how done)</i>	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth				X—Missing teeth				(E X F)—Fixed bridge, brackets to include abutments									
/—Nonrestorable teeth				XXI—Replaced by dentures													
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		16
G	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	F
H																	T
T																	

LABORATORY FINDINGS

45. URINALYSIS A. SPECIFIC GRAVITY			46. CHEST X-RAY (Place date, film number and result)		
B. ALBUMIN			D. MICROSCOPIC		
C. SUGAR					
47. SEROLOGY (Specify test used and result)			48. EEG		49. BLOOD TYPE AND RH FACTOR
			50. OTHER TESTS		

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE			86. TEMPERATURE				
87. BLOOD PRESSURE (Apm of heart level)						88. PULSE (Apm of heart level)									
A. SITTING SYS. 108 DIAS. 66		B. RECUMBENT SYS. DIAS. 		C. STANDING (3 min.) SYS. DIAS. 		A. SITTING		D. AFTER EXERCISE		E. 3 MIN. AFTER		F. RECUMBENT		G. AFTER STANDING 3 MIN.	
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION							
RIGHT 20/		CORR. TO 20/		BY		S. DS		CORR. TO		BY		CORR. TO		BY	
LEFT 20/		CORR. TO 20/		BY		S. DS		CORR. TO		BY		CORR. TO		BY	
92. METEOROPHORIA (Specify distance)															
ES°		EX°		R. H.		L. H.		PRISM DIV.		PRISM CONV.		PC		PD	
93. ACCOMMODATION			84. COLOR VISION (Test used and result)			95. DEPTH PERCEPTION (Test used and score)			UNCORRECTED			CORRECTED			
RIGHT LEFT															
96. FIELD OF VISION			97. NIGHT VISION (Test used and score)			98. RED LENS TEST			99. INTRAOCULAR TENSION						
70. HEARING			71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)						
RIGHT WV /15 BV /15			250 500 1000 2000 3000 4000 6000 8000 856 812 1024 2048 3096 4096 6144 8192												
LEFT WV /15 BV /15			RIGHT												
			LEFT												
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY															

Using beta-gamma survey meter MI-5, background reading .03-.06 mr/hr. No radioactive contamination found.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

77. EXAMINEE (Check)
 A. IS QUALIFIED FOR
 B. IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN CARL L. HANSEN, Lt Col, USAF, MC-PS		SIGNATURE	
80. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE	
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)		SIGNATURE	
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY		SIGNATURE	
		NUMBER OF ATTACHED SHEETS	

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Standard Form 88
(Rev. June 1956)

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
4. HOME ADDRESS (If service, add or R.F.D., city or town, zone and State)			8. PURPOSE OF EXAMINATION	6. DATE OF EXAMINATION
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE		10. AGENCY
		MILITARY	CIVILIAN	11. ORGANIZATION UNIT
12. DATE OF BIRTH	13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
18. EXAMINING FACILITY OR EXAMINER, AND ADDRESS			16. OTHER INFORMATION	
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

26 Jul 58

CLINICAL EVALUATION		ABNORMAL
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. EARS	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (Use 8 and 9 under Laboratory under items 20 and 21)	
<input checked="" type="checkbox"/>	23. DRUGS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 25, 26 and 27)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Unassisted, special maneuvers, optokinetic)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breasts)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Varicosities, etc.)	
<input checked="" type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)	
<input checked="" type="checkbox"/>	32. ANUS AND RECTUM (Hemorrhoids, fistulae, Prolapse, if indicated)	
<input checked="" type="checkbox"/>	33. ENDOCRINE SYSTEM	
<input checked="" type="checkbox"/>	34. G-U SYSTEM	
<input checked="" type="checkbox"/>	35. UPPER EXTREMITIES (Strength, range of motion)	
<input checked="" type="checkbox"/>	36. FEET	
<input checked="" type="checkbox"/>	37. LOWER EXTREMITIES (Strength, range of motion)	
<input checked="" type="checkbox"/>	38. SPINE, OTHER MUSCULOSKELETAL	
<input checked="" type="checkbox"/>	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
<input checked="" type="checkbox"/>	40. SKIN LYMPHATICS	
<input checked="" type="checkbox"/>	41. NEUROLOGIC (Equilibrium tests under item 38)	
<input checked="" type="checkbox"/>	42. PSYCHIATRIC (Specify area for abnormality, duration)	
<input checked="" type="checkbox"/>	43. PELVIC (Females only) (Check here done)	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 11 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth X—Missing teeth (B X B)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth XXX—Replaced by denture																	
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		16
C	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	F
M																	T
T																	

LABORATORY FINDINGS

45. URINALYSIS A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN	C. SUGAR	D. MICROSCOPIC	
47. SEROLOGY (Specify test used and result)		48. EEG	49. BLOOD TYPE AND Rh FACTOR
		50. OTHER TESTS	

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD. <input type="checkbox"/> SLIMMER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE			86. TEMPERATURE								
87. BLOOD PRESSURE (Ave of 3rd read)						88. PULSE (Ave of 3rd read)													
A. SITTING		B. RECUM-BENT		C. STANDING (3 min.)		A. SITTING		B. AFTER EXERCISE		C. 3 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 3 MIN.					
SYS. 108		DIA. 64		SYS.		DIA.		SYS.		DIA.		SYS.		DIA.					
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION											
RIGHT 20/		CORR. TO 20/		BY		S.		OZ		CORR. TO		BY							
LEFT 20/		CORR. TO 20/		BY		S.		OZ		CORR. TO		BY							
92. METEOROPHORIA (Spms/3 distances)																			
OS°		OS'		R. N.		L. N.		PRISM DIV.		PRISM CONV.		PC PD							
93. ACCOMMODATION				94. COLOR VISION (Tan, red and green)				95. DEPTH PERCEPTION (Tan, red and green)				UNCORRECTED							
RIGHT LEFT												CORRECTED							
96. FIELD OF VISION				97. NIGHT VISION (Tan, red and green)				98. RED LENS TEST				99. INTRAOCULAR TENSION							
70. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tan, red and green)									
RIGHT HV		/10 BV		/10		250 250		500 512		1000 1024		2000 2048		4000 4096		8000 8144		8000 8192	
LEFT HV		/10 BV		/10		RIGHT													
						LEFT													

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

Using beta-gamma survey meter MI-5, background reading .03-.06 mr/hr. No radioactive contamination found.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

76. A. PHYSICAL PROFILE						
P	U	L	H	E	S	

77. EXAMINEE (Check)

- A. IS QUALIFIED FOR
 B. IS NOT QUALIFIED FOR

B. PHYSICAL CATEGORY			
A	B	C	E

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN

CARL. L. HANSEN, Lt Col, USAF, MC-PS

SIGNATURE

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF AT-TACHED SHEETS

U. S. GOVERNMENT PRINTING OFFICE: 1967 O-482396

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1. LAST NAME—FIRST NAME—MIDDLE NAME		2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
4. HOME ADDRESS (Include P.O. box, city or town, zone and State)		5. PURPOSE OF EXAMINATION	6. DATE OF EXAMINATION 26 Jul 58
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN	10. AGENCY
11. ORGANIZATION UNIT		12. DATE OF BIRTH	
13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS		16. OTHER INFORMATION	
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (From)	LAST SIX MONTHS

CLINICAL EVALUATION		ABNO. MAL.
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (Include otitis media, otitis externa, and hearing)	
<input checked="" type="checkbox"/>	23. EARS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 25, 26 and 27)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Involuntary parietal movements, nystagmus)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breaths)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Arteriosclerosis, etc.)	
<input checked="" type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)	
<input checked="" type="checkbox"/>	32. ANUS AND RECTUM (Hemorrhoids, Anal fissure, U. instrument)	
<input type="checkbox"/>	33. ENDOCRINE SYSTEM	
<input type="checkbox"/>	34. G.U. SYSTEM	
<input type="checkbox"/>	35. UPPER EXTREMITIES (Through range of motion)	
<input type="checkbox"/>	36. FEET	
<input type="checkbox"/>	37. LOWER EXTREMITIES (Except feet; include range of motion)	
<input type="checkbox"/>	38. SPINE, OTHER MUSCULOSKELETAL	
<input type="checkbox"/>	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
<input type="checkbox"/>	40. SKIN LYMPHATICS	
<input type="checkbox"/>	41. NEUROLOGIC (Excludes items under item 70)	
<input type="checkbox"/>	42. PSYCHIATRIC (Specify any personality deviations)	
<input type="checkbox"/>	43. PELVIC (Females only) (Check how done)	

NOTES. (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 75 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 75)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES
O—Restorable teeth X—Missing teeth (if X's)—Fix of bridge, brackets to include abutments /—Nonrestorable teeth XXI—Replaced by dentures		
U	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 L	
L	17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 F	
H		
T		

LABORATORY FINDINGS

45. URINALYSIS A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN		B. MICROSCOPIC	
C. SUGAR		48. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result)		49. OTHER TESTS	

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REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE		10. AGENCY	11. ORGANIZATION UNIT	
		MILITARY	CIVILIAN	26 Jul 58		
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION		
17. RATING OR SPECIALTY			TIME IN THIS CAPACITY (Fills)		LAST SIX MONTHS	

CLINICAL EVALUATION		ABNO-
SER-	(Check each item in appropriate column; enter "NE" if not evaluated)	MA
X	18. HEAD, FACE, NECK, AND SCALP	
X	19. NOSE	
X	20. SINUSES	
X	21. MOUTH AND THROAT	
X	22. EARS—GENERAL (Use 8 and append (L) or (R) to specify ear; items 19 and 21)	
X	23. DRUMS (Perforation)	
X	24. EYES—GENERAL (Visual acuity and refraction)	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Assess for parallel movement; nystagmus)	
X	28. LUNGS AND CHEST (Include breaths)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Pulsations, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulas; Prostate, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Detailed tests under item 70)	
	42. PSYCHIATRIC (Capacity and personality deviations)	
	43. PELVIC (Female only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)														REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES			
O—Restorable teeth				X—Missing teeth				(D X S)—Part of bridge, brackets to include abutments									
/—Nonrestorable teeth				XXI—Replaced by dentures													
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
G	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	E
H																	F
T																	T

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place date, film number and result)	
B. ALBUMIN	C. MICROSCOPIC		
C. SUGAR	48. ECG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS
47. SEROLOGY (Specify test used and result)			

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Standard Form 88
(Rev. June 1956)

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME		2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS			16. OTHER INFORMATION		
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

26 Jul 58

CLINICAL EVALUATION		
NOR- MAL	(Check each item in appropriate column; enter "NE" if not evaluated)	ABNO- MAL
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (See 8 and 9 under 19 and 21)	
<input checked="" type="checkbox"/>	23. EARS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 25, 26 and 27)	
<input checked="" type="checkbox"/>	25. OPHTHALMOLOGIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Assess for equal parallel movements, conjugation)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breasts)	
<input checked="" type="checkbox"/>	29. HEART (Throat, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Varicose veins, etc.)	
<input checked="" type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)	
<input checked="" type="checkbox"/>	32. ANUS AND RECTUM (Prostate, if indicated)	
<input checked="" type="checkbox"/>	33. ENDOCRINE SYSTEM	
<input checked="" type="checkbox"/>	34. G-U SYSTEM	
<input checked="" type="checkbox"/>	35. UPPER EXTREMITIES (Strength, range of motion)	
<input checked="" type="checkbox"/>	36. FEET	
<input checked="" type="checkbox"/>	37. LOWER EXTREMITIES (Strength, range of motion)	
<input checked="" type="checkbox"/>	38. SPINE, OTHER MUSCULOSKELETAL	
<input checked="" type="checkbox"/>	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
<input checked="" type="checkbox"/>	40. SKIN LYMPHATICS	
<input checked="" type="checkbox"/>	41. NEUROLOGIC (Spinal fluid tests under item 39)	
<input checked="" type="checkbox"/>	42. PSYCHIATRIC (Specify any personality deviations)	
<input checked="" type="checkbox"/>	43. PELVIC (Females only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth I—Missing teeth (O X I)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth XII—Replaced by dentures																			
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L		
I																	E		
O	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	F		
M																	P		
T																	T		

LABORATORY FINDINGS			
45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place date, film number and result)	
B. ALBUMIN		48. BLOOD TYPE AND RH FACTOR	
C. SUGAR		49. OTHER TESTS	
47. SEROLOGY (Specify test used and result)			

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE			86. TEMPERATURE						
87. BLOOD PRESSURE (Apm of heart level)						88. PULSE (Apm of heart level)											
A. SITTING		B. RECUMBENT		C. STANDING (5 min.)		A. SITTING		B. AFTER EXERCISE		C. 5 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 5 MIN.			
89. DISTANT VISION		90. REFRACTION						91. NEAR VISION									
RIGHT 20/		CORR. TO 20/		BY		S.		D.		CORR. TO		BY					
LEFT 20/		CORR. TO 20/		BY		S.		D.		CORR. TO		BY					
92. HETEROPHORIA (Specify distance)																	
R. N.		L. N.		PRISM DIV.		PRISM CONV.		CY		PC		PB					
93. ACCOMMODATION				94. COLOR VISION (Tall wood and cone)				95. DEPTH PERCEPTION (Tall wood and cone)				96. UNCORRECTED					
RIGHT				LEFT				CORRECTED				99. INTRAOCULAR TENSION					
96. FIELD OF VISION				97. RIGHT VISION (Tall wood and cone)				98. RED LENS TEST									
70. HEARING						71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tall wood and cone)					
RIGHT BY		/10 BY		/10		250		500		1000		2000		4000		8000	
LEFT BY		/10 BY		/10		RIGHT		LEFT									

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

In 39 PD radiations: .4- .5 m/hr not above background

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

77. EXAMINEE (Check)

A. IS QUALIFIED FOR
B. IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN

CARL L. HANSEN, Lt Col, USAF, MC, -FS

SIGNATURE

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS

U.S. GOVERNMENT PRINTING OFFICE: 1957 O-482590

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Standard Form 88
(Rev. June 1956)

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION 26 Jul 58	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT	
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION		
17. RATING OR SPECIALTY				TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

CLINICAL EVALUATION		
NO. EVAL.	(Check each item in appropriate column; enter "NE" if not evaluated)	ABNOR. MAL.
X	18. HEAD, FACE, NECK, AND SCALP	
X	19. NOSE	
X	20. SINUSES	
X	21. MOUTH AND THROAT	
X	22. EARS—GENERAL (Use 2 col. remarks (A) orally; specify under items 26 and 27)	
X	23. EARS (Perforation)	
X	24. EYES—GENERAL (Visual acuity and refraction under items 28 and 29)	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Assess for parallel movements, nystagmus)	
X	28. LUNGS AND CHEST (Include bronchi)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Varicosities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulas, fissures, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Gait, feet, strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (See directions under item 28)	
	42. PSYCHIATRIC (Specify any personality deviations)	
	43. PELVIC (Females only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth		I—Missing teeth		(X I S)—Fixed bridge, brackets to include abutments													
/—Nonrestorable teeth		XXI—Replaced by dentures															
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		16
O																	E
H	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	F
T																	T

LABORATORY FINDINGS			
45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN		D. MICROSCOPIC	
C. SUGAR		48. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result)		49. OTHER TESTS	

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				86. TEMPERATURE							
87. BLOOD PRESSURE (Apm of heart level)						88. PULSE (Apm of heart level)													
A. SITTING		B. RECUMBENT		C. STANDING (3 min.)		D. SITTING		E. AFTER EXERCISE		F. 2 MIN. AFTER		G. RECUMBENT		H. AFTER STANDING 2 MIN.					
SYS. 122		DIAS. 90		SYS.		DIAS.		SYS.		DIAS.		SYS.		DIAS.					
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION											
RIGHT 20/		CORR. TO 20/		BY		S.		OX		CORR. TO		BY							
LEFT 20/		CORR. TO 20/		BY		S.		OX		CORR. TO		BY							
92. HETEROPIORIA (Specify distance)																			
ES°		EX°		R. N.		L. N.		PRISM DIV.		PRISM CONV.		PC PD							
93. ACCOMMODATION				94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and score)				UNCORRECTED							
RIGHT		LEFT										CORRECTED							
96. FIELD OF VISION				97. NIGHT VISION (Test used and score)				98. RED LENS TEST				99. INTRAOCULAR TENSION							
70. HEARING				71. AUBIOMETER								72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)							
RIGHT HV		/10 HV		/10		250		500		1000		2000		4000		6000		8000	
						250		500		1000		2000		4000		6000		8000	
LEFT HV		/10 HV		/10															

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

In 30-PD raditation: .4-.5 mR/hr, not above background.

(Use additional sheet if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnosis with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)						76. A. PHYSICAL PROFILE											
						P		U		L		H		E		S	
77. EXAMINEE (Check)						B. PHYSICAL CATEGORY											
A. <input type="checkbox"/> IS QUALIFIED FOR																	
B. <input type="checkbox"/> IS NOT QUALIFIED FOR																	
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER						A		B		C		E					
79. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE											
CARL L. HANSEN, Lt Col, USAF, MO, -FS																	
80. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE											
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)						SIGNATURE											
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY						SIGNATURE				NUMBER OF ATTACHED SHEETS							

U. S. GOVERNMENT PRINTING OFFICE: 1957 O-443308

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REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION 26 Jul 58
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION	
17. RATING OR SPECIALTY			TIME IN THIS CAPACITY (Yr Mo)	LAST SIX MONTHS	

CLINICAL EVALUATION		ABNOR-
NO.	DESCRIPTION (Check each item in appropriate column; enter "NE" if not evaluated)	MAL
X	18. HEAD, FACE, NECK, AND SCALP	
X	19. NOSE	
X	20. EARS	
X	21. MOUTH AND THROAT	
X	22. EYES—GENERAL (Check 24 and 25; include 26 and 27)	
X	23. EARS (Perforation)	
X	24. EYES—GENERAL (Visual acuity and refraction under items 26, 28 and 27)	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Assess normal movements, nystagmus)	
X	28. LUNGS AND CHEST (Include breasts)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Vasomotor, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Examine both; include Prostate, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G.U. SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Examine feet; Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Examine both arms under item 39)	
	42. PSYCHIATRIC (Mood, personality, orientation)	
	43. PELVIC (Females only) (Check how done)	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES
O—Restorable teeth X—Missing teeth (S X B)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth XXX—Replaced by dentures																		
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	
I																		E
H	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	F
T																		T

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place date, film number and result)	
B. ALBUMIN		48. ECG	
C. SUGAR		49. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result)		50. OTHER TESTS	

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> BLUNDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBSE				86. TEMPERATURE											
87. BLOOD PRESSURE (Arm at heart level)						88. PULSES (Arm at heart level)																	
A. SITTING		B. SECUR- GENT		C. STANDING (5 min.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 5 MIN.									
SYS. 96		SYS.		SYS.		SYS.		SYS.		SYS.		SYS.		SYS.									
DIAS. 64		DIAS.		DIAS.		DIAS.		DIAS.		DIAS.		DIAS.		DIAS.									
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION															
RIGHT 20/		CORR. TO 20/		BY		S.		OZ		CORR. TO		BY											
LEFT 20/		CORR. TO 20/		BY		S.		OX		CORR. TO		BY											
92. METROPHORIA (Specify distance)																							
ES°		EX°		R. N.		L. N.		PRISM DIV.		PRISM CORV.		PC PD											
93. ACCOMMODATION				94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and score)				UNCORRECTED											
RIGHT LEFT				97. NIGHT VISION (Test used and score)				98. RED LENS TEST				CORRECTED											
96. FIELD OF VISION				99. INTRAOCULAR TENSION																			
70. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)													
RIGHT MV		/15 BY		/15		250		500		1000		2000		3000		4000		5000		6000		8000	
LEFT MV		/15 BY		/15		250		500		1000		2000		3000		4000		5000		6000		8000	
						RIGHT																	
						LEFT																	

73. NOTES (Continued) AND SIGNIFICANT OR INTERNAL HISTORY

In 39 PD Radiations: .4-.5 mr/hr. Not above background

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

77. EXAMINEE (Check)

A. IS QUALIFIED FOR
B. IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN

CARL T. HANSEN, Lt Col, USAF, MC, -FS

SIGNATURE

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF AT-
TACHED SHEETS

U. S. GOVERNMENT PRINTING OFFICE: 1967 O-422206

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REPORT OF MEDICAL EXAMINATION

PRIVACY ACT MATERIAL REMOVED

1. LAST NAME—FIRST NAME—MIDDLE NAME		2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, state and Zip)		5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION 26 Jul 58	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT
12. DATE OF BIRTH	13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS			16. OTHER INFORMATION		
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

CLINICAL EVALUATION

NOR. NO.	(Check each item in appropriate column; enter "NE" if not evaluated.)	ABNOR. NO.
X	18. HEAD, FACE, NECK, AND SCALP	
Y	19. NOSE	
Y	20. SINUSES	
Y	21. MOUTH AND THROAT	
Y	22. EARS—GENERAL (See 9 and 10; specify condition)	
Y	23. DRUGS (Prescription)	
Y	24. EYES—GENERAL (Specify condition under items 25, 26 and 27)	
Y	25. OPHTHALMOLOGIC	
Y	26. PUPILS (Specify condition)	
Y	27. OCULAR MOTILITY (Specify condition)	
Y	28. LUNGS AND CHEST (Include breaths)	
Y	29. HEART (Thrust, size, rhythm, sounds)	
Y	30. VASCULAR SYSTEM (Arteriosclerosis, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Specify condition)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Specify condition)	
	36. FEET	
	37. LOWER EXTREMITIES (Specify condition)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. HEIN LYMPHATIC	
	41. NEUROLOGIC (Specify condition under item 39)	
	42. PSYCHIATRIC (Specify condition)	
	43. PELVIC (Female only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth		X—Missing teeth		(O X F)—Fixed bridge, brackets to include abutments													
/—Nonrestorable teeth		XXX—Replaced by dentures															
U	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
G	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	E
H	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	F
T	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	T

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY		D. MICROSCOPIC		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN					
C. SUGAR					
47. SEROLOGY (Specify test used and result)		48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS	

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PRIVACY ACT MATERIAL REMOVED

MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE		86. TEMPERATURE	
87. BLOOD PRESSURE (Arms at heart level)						88. PULSE (Arms at heart level)					
A. SITTING		B. RECUMBENT		C. STANDING (5 min.)		A. SITTING		B. AFTER EXERCISE		C. 5 MIN. AFTER	
SYS. 100 DIAS. 66		SYS. DIAS. DIAS. DIAS.		SYS. DIAS. DIAS. DIAS.		A. SITTING		B. AFTER EXERCISE		C. 5 MIN. AFTER	
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION			
RIGHT 20/ CORR. TO 20/		BY		S.		O.K.		CORR. TO		BY	
LEFT 20/ CORR. TO 20/		BY		S.		O.K.		CORR. TO		BY	
92. METEOROPHOBIA (Specify distances)											
83°		82°		D. N.		L. N.		PRISM DIV.		PRISM CONV.	
93. ACCOMMODATION		94. COLOR VISION (Tact used and aware)				95. DEPTH PERCEPTION (Tact used and aware)				UNCORRECTED	
RIGHT LEFT										CORRECTED	
96. FIELD OF VISION		97. RIGHT VISION (Tact used and aware)				98. RED LENS TEST				99. INTRAOCULAR TENSION	
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tact used and aware)			
RIGHT WY /15 BY /15		250 860		500 612		1000 1084		2000 2048		4000 4096	
LEFT WY /15 BY /15		RIGHT		LEFT							
73. NOTES (Comments) AND SIGNIFICANT OR INTERVAL HISTORY											

In 39-PD radiations .4-.5 mr/hr, not above background

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

77. EXAMINEE (Check)

A. IS QUALIFIED FOR
B. IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

76. A. PHYSICAL PROFILE

P	U	L	H	E	B

B. PHYSICAL CATEGORY

A	B	C	E

79. TYPED OR PRINTED NAME OF PHYSICIAN

CARL L. HANSEN, Lt Col, USAF, MC #3

SIGNATURE

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS

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REPORT OF PHYSICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME		2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION 26 Jul 58
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS			16. OTHER INFORMATION		
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

CLINICAL EVALUATION		
NOB. ORAL	(Check each item, in appropriate column, enter "NE" if not evaluated)	ABNOB. ORAL
X	18. HEAD, FACE, NECK, AND SCALP	
X	19. NOSE	
X	20. SINUSES	
X	21. MOUTH AND THROAT	
X	22. EARS—GENERAL (Use 8 col. special Laboratory report under items 70 and 71)	
X	23. EARS (Perforation)	
X	24. EYES—GENERAL (Throat, vision and refraction under items 25, 26 and 27)	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Unassisted, passive, conjugate, movements)	
X	28. LUNGS AND CHEST (Include breaths)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Vasomotor, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Examine by digital, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Examination tests under item 70)	
	42. PSYCHIATRIC (Mental and personality disorders)	
	43. PELVIC (Females only) (Check how done) <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																	REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES
O—Restorable teeth X—Missing teeth (S X B)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth XX—Replaced by dentures																	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
U	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	E
																	F
																	T

LABORATORY FINDINGS			
45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN		D. MICROSCOPIC	
C. SUGAR			
47. SEROLOGY (Specify test used and result)		48. EKG	49. BLOOD TYPE AND RH FACTOR
		50. OTHER TESTS	

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE			86. TEMPERATURE				
87. BLOOD PRESSURE (Apm of Arterial level)						88. PULSE (Apm of Arterial level)									
A. SITTING		B. RECUMBENT		C. STANDING (If applicable)		A. SITTING		B. AFTER EXERCISE		C. 3 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 3 MIN.	
SYS. 118		DIA. 70													
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION							
RIGHT 20/		CORR. TO 20/		BY		S.		D.		CORR. TO		BY			
LEFT 20/		CORR. TO 20/		BY		S.		D.		CORR. TO		BY			
92. HETEROPIORIA (Specify distance)															
ES°		EX°		R. N.		L. N.		PRISM DIV.		PRISM CORV. CT		PC		PD	
93. ACCOMMODATION				94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and score)				UNCORRECTED			
RIGHT												CORRECTED			
LEFT															
96. FIELD OF VISION				97. NIGHT VISION (Test used and score)				98. RED LENS TEST				99. INTRAOCULAR TENSION			
90.				91. AUDIOMETER				92. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)							
RIGHT WY		/10 SV		/10		150 250		500 1000		2000 4000		8000 1144		8128	
LEFT WY		/10 SV		/10		RIGHT		LEFT							

73. NOTES (Comments) AND SIGNIFICANT OR INTERVAL HISTORY
In - 39FD Raditation: 0.4-0.5 mr/hr, not above background

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)						76. A. PHYSICAL PROFILE					
						P	U	L	M	E	S
77. EXAMINEE (Check) A. <input type="checkbox"/> IS QUALIFIED FOR B. <input type="checkbox"/> IS NOT QUALIFIED FOR						B. PHYSICAL CATEGORY					
						A	B	C	E		
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER											
79. TYPED OR PRINTED NAME OF PHYSICIAN CARL L. HANSEN, Lt Col, USAF, MC, -FS						SIGNATURE					
80. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)						SIGNATURE					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY						SIGNATURE				NUMBER OF ATTACHED SHEETS	

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REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, county and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT	
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION		
17. RATING OR SPECIALTY				TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

26 Jun 58

CLINICAL EVALUATION		
NOR- MAL	(Check each item in appropriate col- umn; enter "NE" if not evaluated)	ABNO- MAL
X	16. HEAD, FACE, NECK, AND SCALP	
X	18. NOSE	
X	20. SINUSES	
X	21. MOUTH AND THROAT	
X	22. EARS—GENERAL (For. & int. aspects) (Military service under items 70 and 71)	
X	23. EARS (Perforations)	
X	24. EYES—GENERAL (Visual acuity and refraction under items 25, 26 and 27)	
X	25. OPHTHALMOLOGIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Assisted, unassisted, con- jugate, divergent)	
X	28. LUNGS AND CHEST (Include breasts)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Varicosities, etc.)	0
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Mucous, hemorrhoids, Prostate, U testicular)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Spinal-tum tests under item 70)	
	42. PSYCHIATRIC (Specify any personality disorders)	
	43. PELVIC (Female only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)														REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES			
O—Restorable tooth X—Missing tooth (X F)—Fixed bridge, brackets to include abutments /—Nonrestorable tooth XXX—Replaced by dentures																	
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
I																	E
G	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	F
H																	
T																	T

LABORATORY FINDINGS

45. URINALYSIS A. SPECIFIC GRAVITY		D. MICROSCOPIC		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN					
C. SUGAR					
47. SEROLOGY (Specify test used and result)		48. UEG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS	

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				86. TEMPERATURE							
87. BLOOD PRESSURE (Apm of heart level)						88. PULSE (Apm of heart level)													
A. SITTING		B. RECUMBENT		C. STANDING (2 cmh.)		A. SITTING		B. AFTER EXERCISE		C. 5 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 5 MIN.					
SYS. 132		DIA. 90																	
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION											
RIGHT 20/		CORR. TO 20/		BY		S.		OT		CORR. TO		BY							
LEFT 20/		CORR. TO 20/		BY		S.		OT		CORR. TO		BY							
92. METROPHOBIA (Specify distance)																			
ES°		EX°		S. N.		L. N.		PRISM DIV.		PRISM CONV. CT		PC		PD					
93. ACCOMMODATION				94. COLOR VISION (Farn and panel)				95. DEPTH PERCEPTION (Farn and panel)				UNCORRECTED							
RIGHT LEFT												CORRECTED							
96. FIELD OF VISION				97. NIGHT VISION (Farn and panel)				98. RED LENS TEST				99. INTRAOCULAR TENSION							
70. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Farn and panel)									
RIGHT HV		/10 SV		/10		250 250		500 510		1000 1024		2000 2048		4000 4096		8000 8144		8000 8199	
LEFT HV		/10 SV		/10		RIGHT													
						LEFT													

In 39-PD radiation: .4- .5 mr/hr, not above background

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

76. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)					76. A. PHYSICAL PROFILE					
					P	U	L	H	E	S
77. EXAMINEE (Check) A. <input type="checkbox"/> IS QUALIFIED FOR B. <input type="checkbox"/> IS NOT QUALIFIED FOR					B. PHYSICAL CATEGORY					
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER										
78. TYPED OR PRINTED NAME OF PHYSICIAN CARL L. HANSEN, Lt Col, USAF, MC, -FS					SIGNATURE					
80. TYPED OR PRINTED NAME OF PHYSICIAN					SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)					SIGNATURE					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY					SIGNATURE					
					NUMBER OF ATTACHED SHEETS					

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD. <input type="checkbox"/> SLIM <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE		86. TEMPERATURE																																
87. BLOOD PRESSURE (A.P.M. of heart level)						88. PULSE (A.P.M. of heart level)																																				
A. SITTING		B. RECUMBENT		C. STANDING (5 min.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER																																
D. 5 MIN. AFTER		E. 15 MIN. AFTER		F. 30 MIN. AFTER		G. 45 MIN. AFTER		H. 1 HOUR AFTER		I. 1.5 HOURS AFTER																																
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION																																		
RIGHT 20/		CORR. TO 20/		BY		D.		OS		CORR. TO																																
LEFT 20/		CORR. TO 20/		BY		D.		OS		CORR. TO																																
92. METEOROPHOBIA (Specify distance)																																										
20°		30°		45°		60°		75°		90°																																
93. ACCOMMODATION			94. COLOR VISION (Test card and result)			95. DEPTH PERCEPTION (Test card and score)			96. UNCORRECTED																																	
RIGHT			LEFT			RIGHT			CORRECTED																																	
97. FIELD OF VISION			98. RIGHT VISION (Test card and score)			99. RED LENS TEST			100. INTRAOCULAR TENSION																																	
101. HEARING			102. AUDIOMETER						103. PSYCHOLOGICAL AND PSYCHOMOTOR (Test card and score)																																	
RIGHT WV			/10 SV		/10		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td></td> <td>250 Hz</td> <td>500 Hz</td> <td>1000 Hz</td> <td>2000 Hz</td> <td>4000 Hz</td> <td>8000 Hz</td> <td>16000 Hz</td> <td>32000 Hz</td> <td>64000 Hz</td> </tr> <tr> <td>RIGHT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>LEFT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>							250 Hz	500 Hz	1000 Hz	2000 Hz	4000 Hz	8000 Hz	16000 Hz	32000 Hz	64000 Hz	RIGHT										LEFT									
	250 Hz	500 Hz	1000 Hz	2000 Hz	4000 Hz	8000 Hz	16000 Hz	32000 Hz	64000 Hz																																	
RIGHT																																										
LEFT																																										

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

In 39-PD radiation: 4-5 to mr/hr, not above background

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

77. EXAMINEE (Check)

A. IS QUALIFIED FOR
B. IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN

CARL E. HANSEN, Lt Col, USAF, MC, F-3

SIGNATURE

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

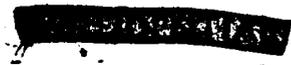
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS



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REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION	
SATSUDA					26 Jul 58	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE		10. AGENCY	11. ORGANIZATION UNIT	
		MILITARY	CIVILIAN			
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION		
17. RATING OR SPECIALTY			TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

CLINICAL EVALUATION		
NO.	DESCRIPTION (Check each item in appropriate column; enter "N" if not evaluated)	ABNO. NO.
X	18. HEAD, FACE, NECK, AND SCALP	
X	19. NOSE	
X	20. SINUSES	
X	21. MOUTH AND THROAT	
X	22. EARS—GENERAL (See 4 for otitis; laboratory study under items 75 and 76)	
X	23. EARS (Perforation)	
X	24. EYES—GENERAL (Visual acuity and refraction under items 46 and 47)	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Unassisted, horizontal motion; vertical motion)	
X	28. LUNGS AND CHEST (Include breasts)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Varicose veins, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Examine; include hemorrhoids, fistulae, U. infection)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Special tests under item 78)	
	42. PSYCHIATRIC (Mood, personality, orientation)	
	43. PELVIC (Female only) (Check how done)	
		<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 11 thru 42 not examined.

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES					
<i>O</i> —Restorable teeth <i>X</i> —Missing teeth <i>(X I)</i> —Fixed bridge, brackets to include abutments <i>/</i> —Nonrestorable teeth <i>XX</i> —Replaced by dentures																							
R																		L					
I	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	18						
O	22	21	30	29	26	27	26	26	24	23	22	21	20	19	18	17	17						
M																							
T																							

LABORATORY FINDINGS			
45. URINALYSIS A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN		D. MICROSCOPIC	
C. SUGAR			
47. SEROLOGY (Specify test used and result)		48. ECG	49. BLOOD TYPE AND RH FACTOR
		50. OTHER TESTS	

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It will be noted that the results of urine examinations (Tab B, Appendix Y) are not entered. They will be forwarded upon completion of analyses and receipt by Joint Task Force SEVEN.


RALPH M. LECHAUSSE
Colonel, USAF, (MC)
Staff Surgeon

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TABULATION OF URINE FINDINGS

26 July 1958

24 Hour Urine
Sample

Morning Urine
for Organics

TAKUXO MARU

- 2.
- 10.
- 11.
- 12.

SATUMA MARU

- 17.
- 23.
- 24.

NOTE: Numbers refer to Blood Examination List

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD <input type="checkbox"/> SLIMBER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE			86. TEMPERATURE																
87. BLOOD PRESSURE (<i>Arms at heart level</i>)						88. PULSE (<i>Arms at heart level</i>)																					
A. SITTING		B. RECUM. BENT		C. STANDING (5 min.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBERT		E. AFTER STANDING 3 MIN.													
SYS. 120		SYS. 71		SYS. 71		SYS. 71		SYS. 71		SYS. 71		SYS. 71		SYS. 71													
DIAS. 71		DIAS. 71		DIAS. 71		DIAS. 71		DIAS. 71		DIAS. 71		DIAS. 71		DIAS. 71													
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION																			
RIGHT 20/		CORR. TO 20/		BY		S.		OR		CORR. TO		BY															
LEFT 20/		CORR. TO 20/		BY		S.		OR		CORR. TO		BY															
92. METEOROPHOBIA (<i>Specify distance</i>)																											
ES°		EX°		R. N.		L. N.		PRISM DIV.		PRISM CONV.		PC		PD													
93. ACCOMMODATION		94. COLOR VISION (<i>Test used and result</i>)				95. DEPTH PERCEPTION (<i>Test used and score</i>)				UNCORRECTED																	
RIGHT		LEFT		97. RIGHT VISION (<i>Test used and score</i>)				98. RED LENS TEST				CORRECTED															
96. FIELD OF VISION		97. RIGHT VISION (<i>Test used and score</i>)				98. RED LENS TEST				99. INTRAOCULAR TENSION																	
70. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (<i>Test used and score</i>)																	
RIGHT WV		/18 BV		/18		150		300		1000		2000		3000		4000		5000		6000		7000		8000			
LEFT WV		/18 BV		/18		150		300		1000		2000		3000		4000		5000		6000		7000		8000			
RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT	

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

Using beta-gamma survey meter MX-5, background reading .02-.06 mr/hr. No radioactive contamination found.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnoses with item numbers*)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (<i>Specify</i>)						76. A. PHYSICAL PROFILE					
						P U L H E S					
						B. PHYSICAL CATEGORY					
77. EXAMINEE (<i>Check</i>)						A B C E					
A. <input type="checkbox"/> IS QUALIFIED FOR B. <input type="checkbox"/> IS NOT QUALIFIED FOR											
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER											
79. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE					
CARL I. HANSEN, Lt Col, USAF, MC-PS											
80. TYPED OR PRINTED NAME OF PHYSICIAN						SIGNATURE					
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (<i>Indicate which</i>)						SIGNATURE					
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY						SIGNATURE					
						NUMBER OF ATTACHED SHEETS					

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Standard Form 88
(Rev. June 1956)

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME		2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, state and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT 26 Jul 58
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS			16. OTHER INFORMATION		
17. RATING OR SPECIALTY			TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

CLINICAL EVALUATION		ABNO-
(Check each item in appropriate column; enter "NE" if not evaluated)		NAL
X	18. HEAD, FACE, NECK, AND SCALP	
X	19. NOSE	
X	20. SINUSES	
X	21. MOUTH AND THROAT	
X	22. EARS—GENERAL (Use 8 see remarks (Audiology, etc.) under items 74 and 75)	
X	23. EARS (Perforation)	
X	24. EYES—GENERAL (Visual acuity and refraction under items 25, 26 and 27)	
X	25. OPHTHALMOLOGIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Assess for parallel movement, conjugate)	
X	28. LUNGS AND CHEST (Include breaths)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Femoral pulses, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulas, fissures, W. induration)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Strength tests under item 76)	
	42. PSYCHIATRIC (Mood, personality, delusions)	
	43. PELVIC (Females only) (Check how done) <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 43 not examined

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth X—Missing teeth (X F)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth XII—Replaced by dentures																	
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
I																	E
G	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	F
H																	T
T																	

LABORATORY FINDINGS			
45. URINALYSIS A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN		D. MICROSCOPIC	
C. SUGAR			
47. SEROLOGY (Specify test used and result)		48. EKG	49. BLOOD TYPE AND RH FACTOR
		50. OTHER TESTS	

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE		86. TEMPERATURE				
87. BLOOD PRESSURE (A mm of Amert level)						88. PULSE (A mm of Amert level)								
A. SITTING		B. RECUMBENT		C. STANDING (8 min.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER				
SYS. DIAS.	124	RECUM. DIAS.	80	SYS. DIAS.		SYS. DIAS.								
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION						
RIGHT 20/		CORR. TO 20/		BY		S.		DZ		CORR. TO				
LEFT 20/		CORR. TO 20/		BY		S.		DZ		CORR. TO				
92. METEOPHOBIA (Specify distances)														
EP°	EX°	S. N.	L. N.	PRISM DIV.	PRISM CONV.	PC	PD							
93. ACCOMMODATION				94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and score)						
RIGHT		LEFT						UNCORRECTED						
								CORRECTED						
96. FIELD OF VISION				97. NIGHT VISION (Test used and score)				98. RED LENS TEST						
								99. INTRAOCULAR TENSION						
70. HEARING						71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)		
RIGHT WV		/18 SV		/18		250	500	1000	2000	4000	8000	8000		
						500	1000	2000	4000	8000	8000			
LEFT WV		/18 SV		/18		RIGHT								
						LEFT								

78. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

Using beta-gamma survey meter MX-5, background reading .03 -.06 mr/hr. No radioactive contamination found.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

77. EXAMINEE (Check)
 A. IS QUALIFIED FOR
 B. IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

76. A. PHYSICAL PROFILE					
P	U	L	H	E	S
B. PHYSICAL CATEGORY					
A	B	C	E		

79. TYPED OR PRINTED NAME OF PHYSICIAN				SIGNATURE	
CARL L. HANSEN, Lt Col, USAF, MC PS					
80. TYPED OR PRINTED NAME OF PHYSICIAN				SIGNATURE	
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)				SIGNATURE	
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY				SIGNATURE	
				NUMBER OF ATTACHED SHEETS	

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REPORT OF MEDICAL EXAMINATION

PRIVACY ACT MATERIAL REMOVED

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (If woman, street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION 26 Jul 58	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT	
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION		
17. RATING OR SPECIALTY				TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

CLINICAL EVALUATION		
NOR- MAL	(Check each item in appropriate col- umn, enter "NE" if not evaluated)	ABNO- MAL
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (Use 9 and 10 under Laboratory Exams under items 72 and 73)	
<input checked="" type="checkbox"/>	23. EARS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Thrust, vision and refraction to include items 69, 70 and 71)	
<input checked="" type="checkbox"/>	25. OPHTHALMOLOGIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Assess for parallel move- ments, convergence)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breasts)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Varicose, etc.)	
<input checked="" type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)	
<input checked="" type="checkbox"/>	32. ANUS AND RECTUM (Hemorrhoids, fistulas; Presence of induration)	
<input checked="" type="checkbox"/>	33. ENDOCRINE SYSTEM	
<input checked="" type="checkbox"/>	34. G-U SYSTEM	
<input checked="" type="checkbox"/>	35. UPPER EXTREMITIES (Strength, range of motion)	
<input checked="" type="checkbox"/>	36. FEET	
<input checked="" type="checkbox"/>	37. LOWER EXTREMITIES (Strength, feet; Usual range of motion)	
<input checked="" type="checkbox"/>	38. SPINE, OTHER MUSCULOSKELETAL	
<input checked="" type="checkbox"/>	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
<input checked="" type="checkbox"/>	40. SKIN LYMPHATICS	
<input checked="" type="checkbox"/>	41. NEUROLOGIC (Reflexes—tests under item 70)	
<input checked="" type="checkbox"/>	42. PSYCHIATRIC (Mood, personality, orientation)	
<input checked="" type="checkbox"/>	43. PELVIC (Females only) (Check how done)	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)																	REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES		
O—Restorable teeth X—Missing teeth (6 X #)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth XXX—Replaced by dentures																			
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L		
C	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	F		
H																	E		
T																	T		

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place date, film number and result)	
B. ALBUMIN		D. MICROSCOPIC	
C. SUGAR			
47. SEROLOGY (Specify test used and result)		48. EKG	49. BLOOD TYPE AND Rh FACTOR
		50. OTHER TESTS	

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PRIVACY ACT MATERIAL REMOVED

MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD. <input type="checkbox"/> SLIM <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				86. TEMPERATURE											
87. BLOOD PRESSURE (AFTER 5 MIN. REST)						88. PULSE (AFTER 5 MIN. REST)																	
A. SITTING		B. RECUMBENT		C. STANDING (5 MIN.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 2 MIN.									
DIAST.		DIAST.		DIAST.		DIAST.		DIAST.		DIAST.		DIAST.		DIAST.									
89. DISTANT VISION						90. REFRACTION						91. NEAR VISION											
RIGHT 20/		CORR TO 20/		BY		S.		OZ		CORR TO		BY											
LEFT 20/		CORR TO 20/		BY		S.		OZ		CORR TO		BY											
92. METEOROPHOBIA (Specify distance)																							
ES ^R		ES ^L		R. H.		L. H.		PRISM DIV.		PRISM CONV.		PC		PD									
93. ACCOMMODATION				94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and score)				UNCORRECTED											
RIGHT				LEFT								CORRECTED											
96. FIELD OF VISION				97. NIGHT VISION (Test used and score)				98. RED LENS TEST				99. INTRACULAR TENSION											
70. HEARING						71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)											
RIGHT WV		/10 SV		/10		250		500		1000		2000		3000		4000		5000		6000			
						880		618		1024		2048		3096		4096		5144		6192			
LEFT WV		/10 SV		/10		RIGHT																	
						LEFT																	
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY																							

Using beta-gamma survey meter MX-5, background reading .03 -.06 mr/hr. No radioactive contamination found.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

77. EXAMINEE (Check)
 A. IS QUALIFIED FOR
 B. IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN
CARL L. HANSEN, Lt Col, USAF, MC-7S

80. TYPED OR PRINTED NAME OF PHYSICIAN

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

76. A. PHYSICAL PROFILE					
P	U	L	H	E	B
B. PHYSICAL CATEGORY					
A	B	C	E		
SIGNATURE					NUMBER OF ATTACHED SHEETS
SIGNATURE					
SIGNATURE					
SIGNATURE					

D. GOVERNMENT PRINTING OFFICE: 1967 O-465290

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REPORT OF MEDICAL EXAMINATION

PRIVACY ACT MATERIAL REMOVED

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (If number, street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION 26 Jul 58	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT	
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION		
17. RATING OR SPECIALTY			TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

CLINICAL EVALUATION

NOB- MAL	(Check each item in appropriate column; enter "NE" if not evaluated)	ABNO- MAL
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (Use 8 see separate Laboratory Report under items 19 and 21)	
<input checked="" type="checkbox"/>	23. DRUMS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 25, 26 and 27)	
<input checked="" type="checkbox"/>	25. OPHTHALMOLOGIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Assess for parallel movement, convergence)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breasts)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Pulsations, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Females only) (Anus only, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Spinal-cord tests under item 19)	
	42. PSYCHIATRIC (Mood and personality dimensions)	
	43. PELVIC (Females only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth X—Missing teeth (O X O)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth XXX—Replaced by dentures																	
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
I																	E
G	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	F
H																	T
T																	

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY			46. CHEST X-RAY (Place, date, film number and result)		
B. ALBUMIN		D. MICROSCOPIC			
C. SUGAR					
47. SEROLOGY (Specify test used and result)		48. ECG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS	

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PRIVACY ACT MATERIAL REMOVED

MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD <input type="checkbox"/> SLIM <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				86. TEMPERATURE					
87. BLOOD PRESSURE (Arm of heart level)						88. PULSE (Arm of heart level)											
A. SITTING		B. RECUM-BENT		C. STANDING (8 min.)		A. SITTING		B. AFTER EXERCISE		C. 3 MIN. AFTER		D. RECUM-BENT		E. AFTER STANDING 8 MIN.			
SYS. 92		DIA. 74															
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION									
RIGHT 20/		CORR. TO 20/		BY		S.		OZ		CORR. TO		BY					
LEFT 20/		CORR. TO 20/		BY		S.		OZ		CORR. TO		BY					
92. METROPHORIA (Spec/ft distance)																	
ES ^D		ES ^R		R. H.		L. H.		PRISM DIV.		PRISM CONV.		PC		PD			
93. ACCOMMODATION				94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and score)				UNCORRECTED					
RIGHT												CORRECTED					
LEFT																	
96. FIELD OF VISION				97. NIGHT VISION (Test used and score)				98. RED LENS TEST				99. INTRAOCULAR TENSION					
70. HEARING				71. AUDIOMETER								72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)					
RIGHT MV		/10 BV		/10		250		500		1000		2000		4000		8000	
						800		1600		3200		6400		12800		25600	
LEFT MV		/10 BV		/10		RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT	
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY																	

Using Beta-Gamma survey meter MI -5, background reading .03-.06 mr/hr. No radioactive contamination found.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Spec/ft)										76. A. PHYSICAL PROFILE											
										P		U		L		M		E		B	
77. EXAMINEE (Check)										B. PHYSICAL CATEGORY											
A. <input type="checkbox"/> IS QUALIFIED FOR										A											
B. <input type="checkbox"/> IS NOT QUALIFIED FOR										B											
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER										C											
										E											
79. TYPED OR PRINTED NAME OF PHYSICIAN										SIGNATURE											
CAPT. I. HANSEN, Lt Col, USAF, MC, FS																					
80. TYPED OR PRINTED NAME OF PHYSICIAN										SIGNATURE											
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)										SIGNATURE											
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY										SIGNATURE				NUMBER OF AT-TACHED SHEETS							

U. S. GOVERNMENT PRINTING OFFICE: 1957 O-48828

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Standard Form 88
(Rev. June 1956)

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME			5. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)			8. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE	10. AGENCY	11. ORGANIZATION UNIT		
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS			16. OTHER INFORMATION			
17. RATING OR SPECIALTY			TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

26 Jul 58

CLINICAL EVALUATION			NOTES (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)
NOR- MAL	(Check each item in appropriate column; enter "NE" if not evaluated)	ABNO- MAL	
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP		Items 11 thru 42 not examined
<input checked="" type="checkbox"/>	19. NOSE		
<input checked="" type="checkbox"/>	20. SINUSES		
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT		
<input checked="" type="checkbox"/>	22. EARS—GENERAL (Use 8 and 9 on inside of history; specify under items 16 and 17)		
<input checked="" type="checkbox"/>	23. EARS (Perforation)		
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction specify under items 46 and 47)		
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC		
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)		
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Assess for parallel movements, nystagmus)		
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breaths)		
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)		
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Varicosities, etc.)		
	31. ABDOMEN AND VISCERA (Include hernia)		
	32. ANUS AND RECTUM (Examine hands, digits; (Females, if indicated)		
	33. ENDOCRINE SYSTEM		
	34. G-U SYSTEM		
	35. UPPER EXTREMITIES (Strength, range of motion)		
	36. FEET		
	37. LOWER EXTREMITIES (Ankle joint) (Strength, range of motion)		
	38. SPINE, OTHER MUSCULOSKELETAL		
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS		
	40. SKIN LYMPHATICS		
	41. NEUROLOGIC (Qualitative tests under item 70)		
	42. PSYCHIATRIC (Specify any personality deviation)		
	43. PELVIC (Females only) (Check how done)		
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL		

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES			
O—Restorable teeth X—Missing teeth (S X S)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth XXX—Replaced by dentures																			
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L		
I																	E		
G	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	F		
H																	T		
T																			

LABORATORY FINDINGS			
45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN		D. MICROSCOPIC	
C. SUGAR		49. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result)		48. ECG	50. OTHER TESTS

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE		86. TEMPERATURE			
87. BLOOD PRESSURE (A/P/M at heart level)						88. PULSE (A/P/M at heart level)							
A. SITTING		B. RECUMBENT		C. STANDING (3 min.)		D. SITTING		E. AFTER EXERCISE		F. 2 MIN. AFTER			
SYS.	DIAS.	SYS.	DIAS.	SYS.	DIAS.	SYS.	DIAS.	BEATS	BEATS	BEATS	BEATS		
	110		72										
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION					
RIGHT 20/		CORR. TO 20/		BY		S.		OK		CORR. TO			
LEFT 20/		CORR. TO 20/		BY		S.		OK		CORR. TO			
92. METROPHORIA (Specify distance)													
ES°		EX°		R. N.		L. N.		PRISM DIV.		PRISM CONV. CT			
93. ACCOMMODATION		94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and score)		96. RED LENS TEST					
RIGHT		LEFT						UNCORRECTED		CORRECTED			
96. FIELD OF VISION		97. NIGHT VISION (Test used and score)				98. INTRAOCULAR TENSION							
99. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)			
RIGHT WV		/16 BY		/16									
LEFT WV		/16 BY		/16									
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY													

In 39-PD radiations: 0.4-0.5 mr/hr, not above background

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)					76. A. PHYSICAL PROFILE						
					P	U	L	H	E	S	
77. EXAMINEE (Check)					B. PHYSICAL CATEGORY						
A. <input type="checkbox"/> IS QUALIFIED FOR											
B. <input type="checkbox"/> IS NOT QUALIFIED FOR					78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER						
					A	B	C	E			
79. TYPED OR PRINTED NAME OF PHYSICIAN					SIGNATURE						
CARE L. HANSEN, Lt Col, USAF, MC, -08					SIGNATURE						
80. TYPED OR PRINTED NAME OF PHYSICIAN					SIGNATURE						
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)					SIGNATURE						
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY					SIGNATURE						
					NUMBER OF ATTACHED SHEETS						

U.S. GOVERNMENT PRINTING OFFICE: 1957 O-482200

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Standard Form 88
(Rev. June 1956)

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE		10. AGENCY	11. ORGANIZATION UNIT	
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS				16. OTHER INFORMATION		
17. RATING OR SPECIALTY				TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

26 Jul 58

CLINICAL EVALUATION		ABNOR- MAL
<i>(Check each item in appropriate column; enter "NE" if not evaluated)</i>		
X	18. HEAD, FACE, NECK, AND SCALP	
X	19. NOSE	
X	20. SINUSES	
X	21. MOUTH AND THROAT	
X	22. EARS—GENERAL <small>(Use 8 on separate laboratory entry under items 70 and 71)</small>	
X	23. EARS (Perforation)	
X	24. EYES—GENERAL <small>(Visual acuity and refraction enter items 25, 26 and 27)</small>	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY <small>(Unaided parallel movements, upgaze)</small>	
X	28. LUNGS AND CHEST (Include breaths)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Varicosities, etc.)	
X	31. ABDOMEN AND VISCERA (Include hernia)	
X	32. ANUS AND RECTUM <small>(Femoral angle, Anus, Prostate, if indicated)</small>	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES <small>(Strength, range of motion)</small>	
	36. FEET	
	37. LOWER EXTREMITIES <small>(Knee, foot) (Strength, range of motion)</small>	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. BURN LYMPHATICS	
	41. NEUROLOGIC <small>(Spinal reflex tests under item 39)</small>	
	42. PSYCHIATRIC <small>(Mood, personality, delirium)</small>	
	43. PELVIC (Females only) <small>(Check how done)</small>	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
<i>O</i> —Restorable teeth <i>X</i> —Missing teeth <i>(R X F)</i> —Fixed bridge, brackets to include abutments <i>/</i> —Nonrestorable teeth <i>YYY</i> —Replaced by dentures																	
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
I	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	E
G																	F
H																	T
T																	

LABORATORY FINDINGS			
45. URINALYSIS A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN		48. BLOOD TYPE AND RH FACTOR	
C. SUGAR		49. OTHER TESTS	
47. SEROLOGY (Specify test used and result)			

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE			86. TEMPERATURE										
87. BLOOD PRESSURE (Arm of heart level)						88. PULSE (Arm of heart level)															
A. SITTING		B. RECUMBENT		C. STANDING (3 MIN.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 2 MIN							
SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.							
89. BISTANT VISION				90. REFRACTION				91. NEAR VISION													
RIGHT 20/		CORR. TO 20/		BY		S.		OR		CORR. TO		BY									
LEFT 20/		CORR. TO 20/		BY		S.		OR		CORR. TO		BY									
92. METEOPHORIA (Specify distance)																					
ES°		EX°		S. N.		L. N.		PRISM DIV.		PRISM CORV. CT		PC		PD							
93. ACCOMMODATION				94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and score)				UNCORRECTED									
RIGHT				LEFT				CORRECTED				99. INTRAOCULAR TENSION									
96. FIELD OF VISION				97. RIGHT VISION (Test used and score)				98. RED LENS TEST				99. INTRAOCULAR TENSION									
97. HEARING				71. AUDIOMETER								72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)									
RIGHT WY		/15 BY		/15		250 266		500 512		1000 1024		2000 2048		3000 3096		4000 4096		5000 5144		6000 6192	
LEFT WY		/15 BY		/15		RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT	

78. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

In 30-RD radiations: 0.4-0.5 mr/rx, not above background.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)																								
75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)																								
76. A. PHYSICAL PROFILE																								
<table border="1" style="width:100%; text-align: center;"> <tr> <td>P</td><td>U</td><td>L</td><td>H</td><td>E</td><td>S</td> </tr> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table>													P	U	L	H	E	S						
P	U	L	H	E	S																			
77. EXAMINEE (Check)																								
A. <input type="checkbox"/> IS QUALIFIED FOR																								
B. <input type="checkbox"/> IS NOT QUALIFIED FOR																								
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER																								
79. TYPED OR PRINTED NAME OF PHYSICIAN																								
CARL L. HANSEN, Lt Col, USAF, MC, -FS																								
SIGNATURE																								
80. TYPED OR PRINTED NAME OF PHYSICIAN																								
SIGNATURE																								
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)																								
SIGNATURE																								
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY																								
SIGNATURE																								
NUMBER OF ATTACHED SHEETS																								

U. S. GOVERNMENT PRINTING OFFICE: 1967 O-482290

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REPORT OF MEDICAL EXAMINATION

PRIVACY ACT MATERIAL REMOVED

1. LAST NAME—FIRST NAME—MIDDLE NAME		2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)		5. PURPOSE OF EXAMINATION	6. DATE OF EXAMINATION
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN	10. AGENCY
12. DATE OF BIRTH		11. ORGANIZATION UNIT 26 Jul 58	
13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS		16. OTHER INFORMATION	
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)	LAST SIX MONTHS

CLINICAL EVALUATION		ASNOB. NO.
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (Hear, 8 sec., speech) (Audiogram, 70 and 71)	
<input checked="" type="checkbox"/>	23. DRUMS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under same 45, 60 and 71)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (A coordinated pursuit movement, saccades)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breaths)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Varicosities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulas) (Proctitis, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G-U SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Spinal-tendon tests under item 38)	
	42. PSYCHIATRIC (Specify any personality deviations)	
	43. PELVIC (Females only) (Check how done)	
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES
O—Restorable tooth /—Nonrestorable tooth	X—Missing tooth XXX—Replaced by dentures (X I O)—Fixed bridge, brackets to include abutments	
R	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	L
I		E
G	32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17	F
H		T
T		

LABORATORY FINDINGS

45. URINALYSIS A. SPECIFIC GRAVITY	B. MICROSCOPIC	46. CHEST X-RAY (Place, date, film number and result)
B. ALBUMIN		
C. SUGAR		
47. SEROLOGY (Specify test used and result)	48. EEG	49. BLOOD TYPE AND RH FACTOR
		50. OTHER TESTS

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PRIVACY ACT MATERIAL REMOVED

MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE			86. TEMPERATURE		
87. BLOOD PRESSURE (Aver. of heart level)						88. PULSE (Aver. of heart level)							
A. SITTING	SYS.	77	D. RECUMBENT	81	C. STANDING (3 MIN.)	SYS.	D. AFTER EXERCISE	C. 2 MIN. AFTER	D. RECUMBENT	E. AFTER STANDING 3 MIN.			
	DIAS.		DIAS.								DIAS.		
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION					
RIGHT 20/		CORR. TO 20/		BY		D.		OX		CORR. TO		BY	
LEFT 20/		CORR. TO 20/		BY		D.		OX		CORR. TO		BY	
92. METEOROPHOBIA (Specify distance)													
ES°		EX°		S. N.		L. N.		PRISM DIV.		PRISM CONV.		PC PD	
93. ACCOMMODATION			94. COLOR VISION (Test card and result)				95. DEPTH PERCEPTION (Test card and score)			UNCORRECTED			
RIGHT LEFT										CORRECTED			
96. FIELD OF VISION			97. RIGHT VISION (Test card and score)				98. RED LENS TEST			99. INTRAOCULAR TENSION			
100. HEARING			101. AUDIOMETER						102. PSYCHOLOGICAL AND PSYCHOMOTOR (Test card and score)				
RIGHT WV		/15	BY		D.		OX		CORR. TO		BY		
LEFT WV		/15	BY		D.		OX		CORR. TO		BY		
103. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY													

In 39 PD radiations: .4-.5 mr/hr, not above background

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

76. A. PHYSICAL PROFILE						
P	U	L	H	E	S	
B. PHYSICAL CATEGORY						
A	B	C	E			

77. EXAMINEE (Check)
 A. IS QUALIFIED FOR
 B. IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE	
CARL L. HAMSON, Lt Col, USAF, MC, PS			
80. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE	
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)		SIGNATURE	
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY		SIGNATURE	

NUMBER OF ATTACHED SHEETS

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1. LAST NAME—FIRST NAME—MIDDLE NAME			E. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.
4. HOME ADDRESS (Number, street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION 26 Jul 58
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS			16. OTHER INFORMATION		
17. RATING OR SPECIALTY			TIME IN THIS CAPACITY (Time)		LAST SIX MONTHS

CLINICAL EVALUATION		ABNO. HAL
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (See 8 for special; (Audiometry usually under items 76 and 77)	
<input checked="" type="checkbox"/>	23. DRUMS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction usually under items 66 and 67)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Unassisted parallel convergent, supraduction)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include breaths)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Femoralities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Masses, tenderness, (Prostate, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G.U. SYSTEM	
	35. UPPER EXTREMITIES (Strength, range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. BRN LYMPHATICS	
	41. NEUROLOGIC (See 66-68 for tests under item 70)	
	42. PSYCHIATRIC (Specify any personality deviations)	
	43. PELVIC (Females only) (Check how done) <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

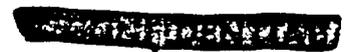
Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively)																		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable tooth X—Missing tooth (6 X 5)—Fixed bridge, brackets to include abutments /—Nonrestorable tooth XXX—Replaced by denture																			
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L		
I																	E		
G	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	F		
M																	T		

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place date, film number and result)	
B. ALBUMIN		D. MICROSCOPIC	
C. SUGAR			
47. SEROLOGY (Specify test used and result)		48. ECG	49. BLOOD TYPE AND Rh FACTOR
		50. OTHER TESTS	



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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				86. TEMPERATURE					
87. BLOOD PRESSURE (Apm of heart level)						88. PULSE (Apm of heart level)											
A. SITTING		B. RECUMBENT		C. STANDING (8 mm.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 2 MIN.			
DIAS. 26		DIAS. 88		DIAS.		DIAS.											
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION									
RIGHT 20/		CORR. TO 20/		BY		S.		OX		CORR. TO		BY					
LEFT 20/		CORR. TO 20/		BY		S.		OX		CORR. TO		BY					
92. METEOROPHOBIA (Specify distance)																	
ES°		EL°		R.N.		L.N.		PRISM DIV.		PRISM CORV.		PC		PD			
93. ACCOMMODATION		94. COLOR VISION (Test used and score)				95. DEPTH PERCEPTION (Test used and score)				UNCORRECTED							
RIGHT		LEFT										CORRECTED					
96. FIELD OF VISION				97. NIGHT VISION (Test used and score)				98. RED LENS TEST				99. INTRAOCULAR TENSION					
70. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)							
RIGHT WV		/18 BV		/18		250		500		1000		2000		4000		8000	
						250		500		1000		2000		4000		8000	
LEFT WV		/18 BV		/18													
73. NOTES (Comments) AND SIGNIFICANT OR INTERVAL HISTORY																	

In 39 PD radiations: .4-.5 mr/hr, not above background

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)																			
75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)												76. A. PHYSICAL PROFILE							
												P U L H E S							
77. EXAMINEE (Check) A. <input type="checkbox"/> IS QUALIFIED FOR B. <input type="checkbox"/> IS NOT QUALIFIED FOR												B. PHYSICAL CATEGORY							
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER												A B C E							
79. TYPED OR PRINTED NAME OF PHYSICIAN CARL L. HANSEN, Lt Col, USAF, MC, -FS												SIGNATURE							
80. TYPED OR PRINTED NAME OF PHYSICIAN												SIGNATURE							
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)												SIGNATURE							
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY												SIGNATURE						NUMBER OF ATTACHED SHEETS	

G. GOVERNMENT PRINTING OFFICE: 1967 O-428296

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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD. <input type="checkbox"/> SLIM <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE			86. TEMPERATURE						
87. BLOOD PRESSURE (Arms at heart level)						88. PULSE (Arms at heart level)											
A. SITTING		B. RECUMBENT		C. STANDING (5 min.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECUMBENT		E. AFTER STANDING 3 MIN.			
SYS. 120		DIAS. 70															
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION									
RIGHT 20/		CORR. TO 20/		BY		S.		OX		CORR. TO		BY					
LEFT 20/		CORR. TO 20/		BY		S.		OX		CORR. TO		BY					
92. METROPHORIA (Spec/y distance)																	
ES°		EX°		E. N.		L. N.		PRISM DIV.		PRISM CORV.		PC		PD			
93. ACCOMMODATION				94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and score)				UNCORRECTED					
RIGHT				LEFT								CORRECTED					
96. FIELD OF VISION				97. NIGHT VISION (Test used and score)				98. RED LENS TEST				99. INTRAOCULAR TENSION					
70. HEARING				71. AUDIOMETER								72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)					
RIGHT MV		/15 SV		/15		250		500		1000		2000		4000		8000	
						250		500		1000		2000		4000		8000	
LEFT MV		/15 SV		/15													

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

Using beta-gamma survey meter MX-5, background reading .03-.06 mr/hr. No Radioactive contamination found.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Spec/y)

77. EXAMINEE (Check)
 A. IS QUALIFIED FOR
 B. IS NOT QUALIFIED FOR

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

76. A. PHYSICAL PROFILE						
P	U	L	M	E	S	
B. PHYSICAL CATEGORY						
A	B	C	E			

79. TYPED OR PRINTED NAME OF PHYSICIAN CARL L. HANSEN, Lt Col, USAF, MC-3S				SIGNATURE			
80. TYPED OR PRINTED NAME OF PHYSICIAN				SIGNATURE			
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)				SIGNATURE			
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY				SIGNATURE			
				NUMBER OF ATTACHED SHEETS			

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Standard Form 88
(Rev. June 1966)

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME		2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (Number, street or R.F.D., only or town, zone and State)		5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION	
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE MILITARY CIVILIAN		10. AGENCY	11. ORGANIZATION UNIT
12. DATE OF BIRTH		13. PLACE OF BIRTH		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS			16. OTHER INFORMATION		
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

26 Jul 58

CLINICAL EVALUATION		ABNOR. W.A.
<input checked="" type="checkbox"/>	18. HEAD, FACE, NECK, AND SCALP	
<input checked="" type="checkbox"/>	19. NOSE	
<input checked="" type="checkbox"/>	20. SINUSES	
<input checked="" type="checkbox"/>	21. MOUTH AND THROAT	
<input checked="" type="checkbox"/>	22. EARS—GENERAL (For 22 see special laboratory units under items 72 and 73)	
<input checked="" type="checkbox"/>	23. EARS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 44 and 45)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Unassisted parallel gaze; lateral, upgaze, downgaze)	
<input checked="" type="checkbox"/>	28. LUNGS AND CHEST (Include bronchi)	
<input checked="" type="checkbox"/>	29. HEART (Thrust, size, rhythm, sounds)	
<input checked="" type="checkbox"/>	30. VASCULAR SYSTEM (Varicosities, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Perianal area, hemorrhoids, fissures, if indicated)	
	33. ENDOCRINE SYSTEM	
	34. G.U. SYSTEM	
	35. UPPER EXTREMITIES (through range of motion)	
	36. FEET	
	37. LOWER EXTREMITIES (knee level) (through range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Rombergism tests under item 37)	
	42. PSYCHIATRIC (Specify any psychiatric diagnosis)	
	43. PELVIC (Females only) (Check how done) <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL	

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

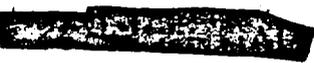
Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)																REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES		
O—Restorable teeth X—Missing teeth (C X B)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth XXX—Replaced by dentures																		
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		16	L
C H T	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18		17	F T

LABORATORY FINDINGS

45. URINALYSIS A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN	D. MICROSCOPIC		
C. SUGAR	48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS
47. SEROLOGY (Specify test used and result)			



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MEASUREMENTS AND OTHER FINDINGS

81. HEIGHT		82. WEIGHT		83. COLOR HAIR		84. COLOR EYES		85. BUILD: <input type="checkbox"/> SLIM <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE				86. TEMPERATURE							
87. BLOOD PRESSURE (<i>Arms at heart level</i>)						88. PULSE (<i>Arms at heart level</i>)													
A. SITTING		B. RECUMBENT		C. STANDING (3 min.)		D. SITTING		E. AFTER EXERCISE		F. 2 MIN. AFTER		G. RECURRENT		H. AFTER STANDING 5 MIN.					
SYS.	DIAS.	SYS.	DIAS.	SYS.	DIAS.	SYS.	DIAS.	BEATS	BEATS	BEATS	BEATS	BEATS	BEATS	BEATS	BEATS				
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION											
RIGHT 20/		CORR. TO 20/		BY		S.		D.		CORR. TO		BY							
LEFT 20/		CORR. TO 20/		BY		S.		D.		CORR. TO		BY							
92. METROPHOBIA (<i>Specify distance</i>)																			
ES°		EK°		B. N.		L. N.		PRISM DIV.		PRISM CONV.		PC PD							
93. ACCOMMODATION				94. COLOR VISION (<i>Test used and score</i>)				95. DEPTH PERCEPTION (<i>Test used and score</i>)				UNCORRECTED							
RIGHT LEFT												CORRECTED							
96. FIELD OF VISION				97. NIGHT VISION (<i>Test used and score</i>)				98. RED LENS TEST				99. INTRAOCULAR TENSION							
70. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (<i>Test used and score</i>)									
RIGHT WY		/15 BY		/15		250		500		1000		2000		4000		6000		8000	
						250		500		1000		2000		4000		6000		8000	
LEFT WY		/15 BY		/15		RIGHT		LEFT											
73. NOTES (<i>Continued</i>) AND SIGNIFICANT OR INTERVAL HISTORY																			

Using beta-gamma survey meter MX-5, background reading .03-.06 mr/hr, No Radioactive contamination found.

(Use additional sheets if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnosis with item numbers*)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (*Specify*)

76. A. PHYSICAL PROFILE					
P	U	L	M	E	S
B. PHYSICAL CATEGORY					
A	B	C	E		

77. EXAMINEE (*Check*):
 A. IS QUALIFIED FOR
 B. IS NOT QUALIFIED FOR
 78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN CARL L. HANSEN, Lt Col, USAF, MC -FS		SIGNATURE	
80. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE	
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (<i>Indicate which</i>)		SIGNATURE	
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY		SIGNATURE	
		NUMBER OF ATTACHED SHEETS	

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Standard Form 88
(Rev. June 1956)

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME		2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (If number, street or R.F.D., city or town, zone and State)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION 25 Jul 58
7. SEX	8. RACE	9. TOTAL YEARS GOVERNMENT SERVICE	10. AGENCY	11. ORGANIZATION UNIT	
12. DATE OF BIRTH	13. PLACE OF BIRTH	MILITARY	CIVILIAN		
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS			16. OTHER INFORMATION		
17. RATING OR SPECIALTY		TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS	

CLINICAL EVALUATION		ABNOR. N.Y.
18. HEAD, FACE, NECK, AND SCALP		
19. NOSE		
20. SINUSES		
21. MOUTH AND THROAT		
22. EARS—GENERAL (For 20 see standard 14; for 21 see standard 15 and 16)		
23. EARS (Perforation)		
24. EYES—GENERAL (For 24 see standard 17; for 25 see standard 18 and 19)		
25. OPHTHALMOSCOPIC		
26. PUPILS (Equality and reaction)		
27. OCULAR MOTILITY (Examine for strabismic nystagmus)		
28. LUNGS AND CHEST (Include breasts)		
29. HEART (Thrust, size, rhythm, sounds)		
30. VASCULAR SYSTEM (Varicosities, etc.)		
31. ABDOMEN AND VISCERA (Include hernia)		
32. ANUS AND RECTUM (Hemorrhoids, fistula; Prostate if indicated)		
33. SNOOCHES SYSTEM		
34. GU SYSTEM		
35. UPPER EXTREMITIES (Strength, range of motion)		
36. FEET		
37. LOWER EXTREMITIES (Strength, range of motion)		
38. SPINE, OTHER MUSCULOSKELETAL		
39. IDENTIFYING BODY MARKS, SCARS, TATTOOS		
40. SKIN LYMPHATICS		
41. NEUROLOGIC (Spinal reflexes tests under item 39)		
42. PSYCHIATRIC (Specify any personality disturbance)		
43. PELVIC (Females only) (Check how done)		
		<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL

NOTES: (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 73 and use additional sheets if necessary.)

Items 31 thru 42 not examined

(Continue in item 73)

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)	REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES																																																																								
O—Restorable teeth /—Nonrestorable teeth X—Missing teeth XXX—Replaced by dentures (6 X 8)—Fixed bridge, brackets to include abutments																																																																									
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LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place date, film number and result)	
B. ALBUMIN	D. MICROSCOPIC	48. EEG	50. OTHER TESTS
C. SUGAR		49. BLOOD TYPE AND RH FACTOR	

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PRIVACY ACT MATERIAL REMOVED

TAKUYI

海上保安庁水質部

(Tested by ship's Doctor)
Date: 15th July 1958

<u>Name</u>	<u>W.B.C</u>	<u>PR</u>	<u>UR</u>	<u>Sugar</u>
	4000			
	3200			
	4800			
	4200			
	3800			
	3200			
	4600			
	3500			
	3000			
	4000			

NOT DONE

PRIVACY ACT MATERIAL REMOVED

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PRIVACY ACT MATERIAL REMOVED

海上保安庁水師第

TAKUCHI

(Tested by ship's Doctor)
Date: 18th July 1958

<u>W.B.C</u> 2800	<u>PROTEIN</u> - RML	<u>Urobilinogen</u> - RML	<u>Suger</u> -
Unmuseared	-	±	-
4900	-	-	-
2600	-	-	-
2000	-	-	-
3300	-	±	-
2900	-	-	-
3600	-	++	-
3300	-	-	-
4000	-	±	-
3400	-	+	-
3000	-	-	-
3200	-	-	-
3800	-	-	-

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PRIVACY ACT MATERIAL REMOVED

[REDACTED]

[REDACTED]

<u>Name</u>	<u>W.B.C</u>	<u>PR</u>	<u>Ur</u>	<u>Suger</u>
	3300	-	-	-
	4500	-	-	-

[REDACTED]

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TABULATION OF LAB (CAT BY BLOOD) EXAMINATIONS

TAKUO

28 July 1968

Exam	HEMOGLOBIN (g/dl) X	INTRAVENOUS BLOOD SAMPLE (X) TAK U	RBC	WBC	WHITE BLOOD CELL DIFFERENTIAL				
					H	L	M	N	P
1.	108		5,200,000	4700	20	4	-	2	74
2.	108		5,150,000	4550	44	2	-	8	46
3.	94		4,630,000	4300	32	-	2	6	60
4.	92		4,610,000	4200	26	-	-	4	70
5.	98		5,440,000	4450	62	-	2	4	32
6.	98		4,200,000	5850	42	-	4	2	52
7.	98	X	4,620,000	9500	48	-	-	2	50
8.	98	X	4,430,000	6400	49	8	-	-	43
9.	110	X	4,600,000	6200	68	-	-	3	29
10.	78	X	5,190,000	5700	68	-	-	-	32
11.	108	X	5,290,000	6400	48	4	2	-	46
12.	94	X	4,630,000	7550	42	-	-	6	52

SAGUMA

13.	122		6,150,000	7750	30	2	2	4	42
14.	108		4,520,000	9000	30	-	4	12	54
15.	98		4,840,000	9200	40	12	20	6	22
16.	109		5,290,000	7580	62	-	10	-	28
17.	104		5,210,000	8300	66	6	-	2	26
18.	110		5,280,000	7100	47	-	-	10	43
19.	98		4,510,000	8400	40	7	7	3	54
20.	104		4,820,000	4450	50	10	-	4	36
21.	98		4,950,000	11000	55	10	5	6	24
22.	104		4,740,000	8050	30	-	2	2	66
23.	106		5,880,000	4650	42	6	-	-	52
24.	103		4,680,000	5320	42	4	2	6	46

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NAME AND NUMBER	BLOOD RESULTS RABAUL CLINIC 19 & 25 JULY 1958					OUR RESULTS (RABAUL) AND ARMED FORCES INSTITUTE OF PATHOLOGY REPORT ON SMEARS - 26 JULY 1958							PLATELETS				
	(SARLY) HPO% RBC x10 ⁶	WBC	N	B	E M L	HPO% RBC x10 ⁶	WBC	N	B	E M L							
1.	116	5.5	4300	57	1	2	4	38	108	5.2	4700	20	4	-	2	74	Adequate
				(Total 102)													
5.	---	---	3700	64	-	1	2	33	98	5.44	4450	62	-	2	4	32	Adequate
6.	102	---	9500	61	-	4	5	30	85	4.28	5850	42	-	4	2	52	Adequate
7.	84	---	10300	52	-	2	5	41	98	4.62	9500	48	-	-	2	50	Low
8.	100	---		56	2	5	9	28	98	4.43	6400	49	8	-	-	43	Low
9.	98	---		65	-	8	4	23	110	4.6	6200	68	-	-	3	29	Low
10.	104	4.99	3450	59	-	4	8	29	76	3.16	5700	68	-	-	-	32	Adequate
11.	92	---		57	-	1	5	34	108	5.29	8400	48	4	2	-	46	Adequate
12.	96	---		56	-	4	6	34	94	4.64	7550	42	-	-	6	52	Low
13.	114	---	5500						122	6.15	7750	50	2	2	4	42	Low
14.	94	---	5500						108	4.52	9000	30	-	4	12	54	Low
15.	96	---	5600						98	4.34	9200	40	12	20	6	22	Adequate
16.	94	---	6150						108	5.29	7550	62	-	10	-	28	Adequate
17.	100	---	4600						104	5.21	8300	66	6	-	2	26	Uncertain
18.	90	---	5350						110	5.23	7100	47	-	-	10	43	Low
19.	86	---	5600						98	4.51	8400	40	-	-	3	54	Low
23.	---	---	4000	61	-	6	5	28	106	5.36	4650	42	6	-	-	52	Adequate

PRIVACY ACT MATERIAL REMOVED

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South Pacific Post, Port Moresby, Papua-New Guinea
Thursday, July 24, 1958

JAP SHIP DOESN'T WANT U.S. HELP

It was not necessary to send a special decontamination ship from America to clear the two Japanese survey ships of radiation, the Post's special representative in Rabaul was told yesterday.

The rejection of American aid by the Japanese in Rabaul followed Australian reports this week that the Japanese Government had demanded that Americans who, they claim, were responsible for the radiation of Japanese ships, should send a decontamination squad to Rabaul.

The Post's Rabaul representative questioned the Japanese yesterday.

They said that they considered such a move unnecessary.

"I asked the Japanese if they were at all worried about the radiation," the representative said.

They said no.

"I asked them if any of them were feeling any ill-effects from radiation.

Not One Sick

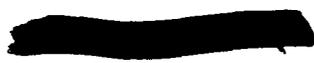
"They said no. They also said that not one man aboard was sick, nor had any received any kind of burns through radiation.

"I asked them how they were enjoying Rabaul. They said it was very peaceful and very beautiful.

"Today, radiation on board is down to negligible proportions.

"The Japanese here have been in touch with their Government representatives who have ordered them to wash the ship down constantly.

"They hose the ships twice a day.



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[REDACTED]

Continuation of item
South Pacific Post, Port Moresby, Papua-New Guinea
Thursday, July 24, 1958

"It is not yet known when they will sail from Rabaul."

The ships, Takuja Maru and Satsuma Maru arrived in Rabaul last weekend.

Their captains claimed that they had been contaminated by the fall out from an atomic cloud which has been blown from the American testing grounds at Eniwetok.

Rabaul authorities tested the ships on their arrival and found that the radiation count on one ship was slightly higher than the background count for Rabaul.

Medical authorities did not consider the radiation to be dangerous.

[REDACTED]

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Rabaul Times, Rabaul, July 25, 1958

JAPANESE SHIP MAY HAVE SEARCHED FOR RADIO-ACTIVE FALL OUT AREA

A Japanese survey ship which came into Rabaul on Saturday and reported radio-active contamination may have "searched for an area of radio-activity so that it could sail into the fringe of it" according to unofficial opinions in Rabaul this week.

The ship, Takujo Maru, reported contamination by radio-active fall-out from stem tests at Eniwetok Atoll, 1300 miles north-east of New Britain.

"We were 600 miles from the centre of the tests, taking a course recommended safe by the Americans, when wind blew the cloud onto our ship," the ship's master reported.

He said that for 24 hours the ship's radiation count had been 20 higher than the limits of human safety.

Tests at Rabaul showed the ship was still slightly radio-active, but not at a dangerous level. The count decreased daily.

Doctors blood-tested 51 officers and men from the ship and found five suffering from a reduction in the average number of white corpuscles -- a symptom of radiation exposure.

But the Regional Medical Officer for New Guinea Islands, Dr. C. Hassler, said he did not believe the men were seriously or permanently affected.

Statements made by the ship's master and observations carried out by Rabaul officials have led to the impression that the ship may have "looked for a radiation cloud."

Technicians were apparently continually checking elaborate radiation instruments carried on board.

[REDACTED]

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[REDACTED]

Continuation of item
Rabaul Times, Rabaul, July 25, 1958

Dr. Hasler believes that any other ship could have received even greater radiation and would not have known anything about it if not carrying the special instruments.

The Japanese claim the contamination was "unexpected and accidental."

Takuje Maru entered Rabaul with another similar ship, Satsuma Maru, which was not affected.

(See Page Four story "We Walked Behind Barriers").

[REDACTED]

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[REDACTED]

Rabaul Times, Rabaul, July 25, 1958

WE WALKED BEHIND BARRIERS TO A RADIO-ACTIVE VESSEL
(Rabaul Times Special Writer)

Accompanying an official party of two senior Administration officers, two doctors and two police officers, I went behind barricades at the Rabaul main wharf on Saturday and boarded a radio-active Japanese ship.

Before I could go with the party I had to give an undertaking to harbour and medical officers that I was going on board at my own risk because when we walked up the gangplank we did not know the level of radiation contamination.

The ship is Takujo Maru. Her Master, Captain Syukichi Matsubara, was a Japanese Air Force officer stationed at Rabaul during the Pacific War.

Matsubara brought his ship into Rabaul on Saturday claiming that six days earlier winds had blown a radio-active cloud 600 miles from tests at Eniwetok Atoll and contaminated the ship.

Takujo Maru is a beautifully-fitted survey vessel engaged in cartographic research in the general area of the Caroline Islands.

She arrived with another and bigger ship, Satsuma Maru, which is carrying out similar work in the same area but which escaped radiation contamination.

The two ships, long and white, tied up together early in the morning taking up more than the full length of the main wharf.

A small crowd gathered outside barriers which native police constables patrolled near the two main entrances.

Just inside the barriers a group of Japanese technicians and officers from the ships set up electronic equipment and talked with a party of six Rabaul officials.

Leading the party was the senior Administration officer in New Britain, Mr. J. R. Foldi, District Commissioner. With him was the Regional Medical Officer for New Guinea Islands, Dr. Charles Hassler.

LANGUAGE

Language problems were obviously a difficulty, but English was used slowly on both sides. Hands waved and heads nodded.

A Japanese of medium build with a mop of black hair going gray nodded and smiled. "This is a report we make," he said.

He was Captain Syukichi Matsubara, master of Takujo Maru. He was much older than most of the other Japanese, slightly stooped, heavily lined in the face.

Technicians completed setting up their equipment which was used to give a background radiation count for Rabaul. They planned to repeat the tests on the ship to demonstrate that the count there was higher than ashore.

[REDACTED]

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[REDACTED]

Rabaul Times, Rabaul, July 25, 1958

With their eyes on a stop watch, the men from ship and shore counted under their breaths in English and Japanese. The count came to 24 a minute.

WATCHED

Then the technicians picked up their equipment and we walked to the ship, filling up the springy gangplank under the eyes of a group of Japanese who leaned over the rail of the main deck.

Mr. Feldi and Dr. Hassler were first on board. They were followed by another medical officer, the Rabaul Harbourmaster, Captain G. W. P. O'Donoghue, and two police officers, Sub-inspectors E. B. Young and J. Herbert.

On the decks Japanese seamen scrubbed and hosed as they continued decontamination measures which they said had been carried out for the past six days.

With the aid of an interpreter and with assistance from his officers, Captain Matsubara told his story in the spotless chartroom of the ship.

MAP

Sometimes he pointed to a map on the wall which showed the course of the ship and the estimated path of the radio-active cloud.

He said that American authorities had been aware of the presence of the two Japanese ships in the Carolines area, and had given instructions of a safe course during recent atomic tests at Eniwetok.

"They said to us go here, and go here," he said, and he waved his hand at the map.

Captain Matsubara continued: "The course was about 500 or 600 miles west of the test area.

"We were north of you people. It was on Monday when a strong wind came up.

"The wind was not expected. It blew the radio-activity on top of us and the ship was affected."

ABOVE LIMIT

Captain Matsubara claimed that for 24 hours the radiation count had been up to 70 a minute -- about 20 above the average limit of human safety.

But when we left the chartroom and his technicians tested the decks and around the lifeboats, the count was only 28 -- four above the background count established on the wharf and within safe limits according to Doctor Hassler.

On deck the language difficulties continued. Dr. Hassler, a big powerful man who towered above most of the Japanese, can speak five languages -- but Japanese is not one of them.

He gestured with his hands and his arms, and the Japanese gestured back.

[REDACTED]

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[REDACTED]

Rabaul Times, Rabaul, July 25, 1958

ACCENT

Captain Matsubara's English was at times quite fluent, but his accent had us defeated.

"How did you know the ship had received a radio-active dose?" the captain and his officers were asked.

"We knew because our instruments told us," was the reply.

"But why were you using these instruments?" was the next question.

"We always check them regularly because they are part of our regular equipment on this sort of ship," Captain Matsubara said.

OPINION

Captain Matsubara's statement later gave rise to a freely expressed opinion that the Japanese had "gone looking for a bit of radiation to sail through."

But the captain and his officers denied this. They stuck to their story that they had accepted the American dictation of a safe course, and had been following that course when the wind brought contamination to their ship.

Later we learnt that the visit to Rabaul was not Captain Matsubara's first.

HIS SECOND VISIT TO RABAU

Ashore the next day he sailed and said: "This Rabaul is a pleasant place now.

"It is all peace today. I remember it differently when it was not a pleasant place.

"In the war I was in the Japanese Air Force.

"I was stationed at Vunakanau."

AIRSTRIP

Vunakanau is a big airstrip about 14 miles from Rabaul which was put down before the war and later enlarged and used by the Japanese in their assaults through the South Pacific.

[REDACTED]

3

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[REDACTED]

Rabaul Times, Rabaul, July 25, 1958

Captain Matsubara is believed to be the only Japanese so far who has visited Rabaul since the war and has admitted to having been stationed there during the war.

He said most of the others on the ship knew nothing of the war.

"They are young and went to school then," he said.

While tests were continued on the deck I went for a walk through the ship.

In the galley, in the engine room and in the equipment rooms, smiling little men looked at me but few seemed to have even the vaguest understanding of English words.

WEALTH

What I saw left me amazed at the wealth of equipment scattered through the ship.

It is without doubt one of the cleanest and best-kept ships I have seen. Shining glass, polished metal and brass, and freshly-painted fittings were noticeable throughout the ship.

In the wheelhouse much of the equipment was labelled in duplicate -- in Japanese and English.

A fortune's worth of electronic equipment was installed, including various types of radar units, communications equipment, echo-sounding recorders and meteorological equipment.

Much of the equipment had made permanent records on graphs, and the graphs were neatly stowed in polished metal cases.

RECORD

A complete record was available for instance, of the depths of the ocean at all times during the entire voyage.

All types of navigational aids were installed, and every item of equipment was kept clean and bright.

In the main radio room blue enamel cases held the receiving and transmitting equipment.

The galley was small, gleaming and compact. A cook in white clothes was stowing coloured metal utensils in racks, and the oil-fired stove was roaring gently.

The engine room, equipped with two big diesels, was painted in green and black with all unpainted metalwork polished to brilliance.

[REDACTED]

4

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[REDACTED]

Rabaul Times, Rabaul, July 25, 1958

I asked through the ship "Has any one been sick? have you a sick bay?" but could not get an answer.

IN CHAIR

A man half sleeping in a deck chair rose to his feet when he heard my footsteps. I repeated my questions to him.

He looked at me for a few seconds, lifted his shoulders, and replied: "In a few minutes we eat."

BLOOD TESTS MADE ON 51 MEN

Back on deck I found Dr. Hassler making arrangements to ship blood-tested at the Administration clinic.

One of the police officers grinned and said "I wonder how the Doc tests them. Does he shove a bit of litmus paper in their mouths to see if it turns red?"

We all laughed.

The Japanese looked at each other in silence for a few moments. Then they must have decided it was a good joke, because they joined in the laugh.

Only 14 men were blood-tested at first, but later Dr. Hassler decided to run through the complement of 51 officers and men.

From the 51 he found that five were suffering from reduced white blood corpuscle count, which is an effect of radiation exposure. But he considered that even these five were in no danger.

Later in his office he said: "This is my first shall we say, 'atomic' ship. I suppose it is yours, too.

"I have reached several conclusions.

"The first is that there is no doubt in my mind that this ship did receive some radiation contamination. Exactly how much we cannot say because we have only the report of what happened early last week.

CAUSE

"There is little doubt that radiation probably caused the blood condition revealed in five men.

"But if these men had been seriously affected as far back as early last week we would begin to have some symptoms by now.

[REDACTED]

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[REDACTED]

Rabaul Times, Rabaul, July 25, 1958

"We would have radiation burns and some sickness, but this is not evident.

"Apparently, then, they are not seriously affected.

"I am quite prepared to say that if another ship not fitted with special equipment had received the same amount of contamination, no one would have known anything about it.

"It is only the instrument readings which woke up these people to the fact that there had been some contamination.

"I do not really consider that there has been any danger in the ship itself, since its arrival in Rabaul, but I made it out of bounds for visitors because I felt that was my responsibility.

CLOSED

"Perhaps if we had instruments of our own we could have definitely declared it safe, but as we were forced to use the Japanese instruments at all times, I thought it wiser to close the ship to all except officials.

"I had of course no objection to the Japanese coming ashore, because even if they had been sick from radiation there is no danger to other people. It is not infectious.

"We have run another series of tests on the ship and the activity has dropped still further.

"No one seems to need medical care, and there is no reason why the ships should not leave whenever they wish.

"I believe that the contaminated ship passed through the extreme outer fringes of the radio-active cloud.

"This is supported by the fact that the other ship, although in roughly the same area, was not contaminated."

HOSING

The Japanese say that the only instruction they have received so far from Japan is to continue regular decontamination measures by hosing and scrubbing the ship.

More than 100 officers and men from the two ships have capitalized on the Rabaul visit by going on a tourist spree.

[REDACTED]

6

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[REDACTED]

Rabaul Times, Rabaul, July 25, 1958

They have walked miles, taken photographs, bought sparingly in a few shops and tried to strike up conversations with some natives.

Most of them are young, and they include a big number of technicians and engineers.

They dress neatly in blue-grey uniforms with white peaked caps and dark ties.

Sometimes they wear conservative sports clothes, usually with the white hanging out over the shorts.

Both the ships took on water and supplies early this week.

[REDACTED]

7

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Saturday, 26 July SYDNEY collected at Rabaul 27 July

CHECKING DUSTED CREWS

NEW YORK, Saturday (A.A.P.). -- Three U. S. Army doctors have flown to Rabaul, New Britain, to examine Japanese seamen said to have been dusted with radio-active fallout. (? End of Bulletin. R.M.L.)

The fall-out was from a United States hydrogen bomb test at Eniwetok, in the western Pacific.

The doctors from Truk, in the Caroline Islands, will examine five crew members on the coastguard vessels Takuyo Maru and the Satsuma Maru, who were taken to hospital suffering from radiation exposure.

United Press said the ships sent geiger counters haywire when they reached Rabaul last weekend, but the radiation had dropped below the danger level.

The captains of the two ships, which were making oceanographic studies, said they were well out of the danger zone when showered with radio-active fall-out.

Jap Protest

The coastguard in Tokyo says 37 members of the crews and scientific teams aboard the vessels have been under medical observation because they showed signs of radiation illness.

Tokyo reports say the Japanese Government is preparing a protest to the U.S. about the incident, which occurred on July 14 outside the designated nuclear danger area.

The incident may spark a new wave of demonstrations in Japan during the

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[REDACTED]

Continuation of item
Saturday, 26 July SYDNEY collected at Rabaul 27 July

world conference against hydrogen bombs, to open in Tokyo on August 12.

Team Going

The conference will begin a week after the two ships are due back in Japan.

In Washington the U.S. is reported to be sending a team of technicians to make tests on the two Japanese ships.

U.S. Officials believe that only one of the two ships might have been affected.

[REDACTED]

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JAPAN TO ASK DAMAGES FOR ATOM DUST

TOKYO (UPI) -- Foreign Minister Aichiro Fujiyama said yesterday he would ask the U. S. government for a compensation when he gets full reports on damage inflicted on crew men of two atom-dusted Japanese scientific survey ships.

Fujiyama made the statement in answer to a question by Socialist member Mrs. Satoko Togari who said at a House of Representatives Foreign Affairs Committee meeting that the Japanese Coast Guard boats Takuyo and Satsuma were outside the Bikini danger zone when they received atomic dust.

* * *

Mrs. Togari demanded that the Japanese government file a strong protest with the U. S. Government.

Fujiyama said as soon as he finds the condition of the crew members of the two ships, he would send a protest note to the U. S. and ask for a compensation for any damage inflicted on the crew men.

Doctors on Way to Aid Crewmen

YOKOHAMA (UPI) -- The Coast Guard dispatched the 700-ton patrol boat Muroto to Guam yesterday with a doctor and medicine for crew men of two atom-dusted Japanese scientific survey ships.

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[REDACTED]

Continuation of The Honolulu Advertiser item of Tuesday, July 29, 1958

Reports from Rabaul where the Coast Guard boats Takuyo and Setsuma put in after meeting a radioactive cloud west of the Bikini danger zone said none of the crew men was in danger.

But the Coast Guard, taking no chances, ordered the Muroto to meet the two ships at Guam. The Muroto also carried 11 Coast Guardsmen to take over the duties of any ill personnel.

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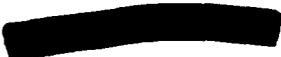
PERSONNEL

TAKIYO MARU

Captain
 , Chief Mate
 Ship's Doctor
 Head Scientist, Japanese Hydrographic Office,
 Tokyo
 Scientist, Japanese Hydrographic Office,
 Tokyo
 Scientist, Japanese Hydrographic Office.
 Tokyo
 and others

SATULA MARU

, Captain
 , Ship's Doctor
 , Oceanographer, Japanese Hydrographic Office
 , Scientist, Japanese Hydrographic Office
 and others



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As a result of our examinations of the TANKERS and the SAILORS and of the personnel, our findings do not indicate evidence of radiation sickness or any contamination of either vessel which should delay your departure or normal use of the vessels or equipment either now or in the future.

We are very desirous of conveying to you and all your personnel and to your Head Quarters our most sincere appreciation of everyone's complete cooperation and personal friendliness and help. It has been our pleasure to have and this opportunity of meeting you personally and working with you.

We wish to express our thanks and sincere best wishes to you and all your people and wish you a safe and pleasant voyage home.

<u>NAME</u>	<u>BIRTH</u> (Place, County, Date)	<u>U.S. CITIZEN</u>	<u>UNIT ATTACHED</u>	<u>MILITARY</u> (RANK, SERIAL)	<u>CIVILIAN</u>
LECHAUSSE, Ralph M.	Newark (Essex) N.J. 7 Sep 1906	Yes	Hq JTF-7	COL, USAP 20818A	
COEKE, Roscoe H.	Post Falls, Idaho 31 Dec 1917	Yes	CTG 7.5	CAPT, USFUS PES-3124	
HANSEN, Carl L., Jr.	Springfield (Hampden), Mass. 23 Jan 1920	Yes	TC 7.4	LTCOL, USAP 19353A	
<u>CREW</u>					
FRAZEE, Malcolm C.	San Diego (San Diego), Calif. 13 April 1923	Yes	TC 7.4 PAR ELEMENT	LTCOL, USAP 15564A	
FLEMING, Russell A. (Co-Pilot)	Los Angeles (Los Angeles) Calif. 16 Jan 1932	Yes	TC 7.4 PAR ELEMENT	1ST LT, USAP AO-3203310	
WILLARD, Ernest N. III (Navigator)	Knoxville (Knoxville) Tenn. 5 June 1927	Yes	TC 7.4 PAR ELEMENT	CAPT, USAP AO-591284	
WARD, James F. (Radio Operator)	Rome, Florida, 6 May 1927	Yes	TC 7.4 PAR ELEMENT	S/SGT, USAP AF-44113670	
BORING, John O.	Vinton, Ohio, 26 Nov 1932	Yes	TC 7.4	S/SGT, USAP AF-15296125	

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RELATED
RECORDS

"SATSUMA"

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 HB 100 2
 HB 99 3
 HB 105 4
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 HB 99 7
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 HB 100 9
 HB 100 10
 HB 100 11
 HB 100 12

HB 12 2
 - HB 108 9
 HB 100 10
 - HB 100 11
 HB 104 12
 HB 100 13
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 HB 104 15: 4,820,000 4,450
 HB 99 16
 HB 104 17
 HB 100 18
 HB 100 19
 HB 100 20

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•BATSUKA•

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[REDACTED]

Col Townsend

Classified Message for Colonel Lechausse

The technical quality of peripheral blood smears forwarded for study is poor and has probably resulted from lack of necessary fixation. The cytologic details are indistinct preventing satisfactory cytologic appraisal of cellular elements and platelets. Fixation may be achieved on future material by dipping freshly dried smears briefly in methyl alcohol.

Evaluation will be limited to estimation of total leukocyte and platelet levels and a differential leukocyte count. The leukocyte levels are recorded as follows:

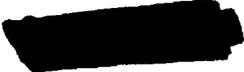
Normal, borderline leukopenia, leukopenia and severe leukopenia. The platelets will be noted as adequate, low, definite thrombocytopenia or uncertain.

"AG-PARAPHRASE NOT REQUIRED EXCEPT PRIOR TO CATEGORY B. BE CAREFUL TO OBSERVE ALL INTERNAL SECURITY BY REGULATIONS PRIOR TO DECLASSIFICATION. UNCLASSIFIED REFERENCE IF THE DATE-TIME GROUP IS QUOTED".

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(more)

- 
- Case #1. Severe Leukopenia, 20 N, 4B, 74 L, 2 M.
Platelets adequate.
- Case #2. Leukopenia, 44 N, 2 B, 46 L, 8 M.
Platelets low.
- Case #3. Leukopenia, 32 N, 60 L, 6 M, 2 E.
Platelets low.
- Case #4. Severe leukopenia, 26 N, 70 L, 4 M.
Platelets low.
- Case #5. Normal, 62 N, 32 L, 4 M, 2 E.
Platelets adequate.
- Case #6. Leukopenia, 42 N, 52 L, 2 M, 4 E.
Platelets adequate.
- Case #7. Low Normal, 48 N, 50 L, 2 M.
Platelets low.
- Case #8. Borderline leukopenia, 49 N, 8 B, 43 L.
Platelets low.
- Case #9. Normal, 68 N, 29 L, 3 M.
Platelets low.
- Case #10. Normal, 68 N, 32 L.
Platelets adequate.
- Case #11/ Borderline leukopenia, 48 N, 4 B, 46 L, 2 E.
Platelets adequate.
- Case #12. Borderline Leukopenia, 42 N, 52 L, 6 M.
Platelets low.
- Case #13. Leukopenia, 50 N, 2 B, 42 L, 4 M, 2 E
Platelets low
- Case
#14. Borderline leukopenia, 30 N, 54 L, 12 M, 4 E.
Platelets low.
- Case #15. Normal, 40 N, 12 B, 22 L, 6 M, 20 E.
Platelets adequate.

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Case # 16. Normal, 62 N, 28 L, 10 E.
Platelets adequate.

Case # 17. Normal, 66 N, 6 B, 26 L, 2 M.
Platelets uncertain technically.

Case # 18. Leukopenia, 47 N, 43 L, 10 M.
Platelets low.

Case # 19. Leukopenia, 40 N, 54 L, 3 M.
Platelets low.

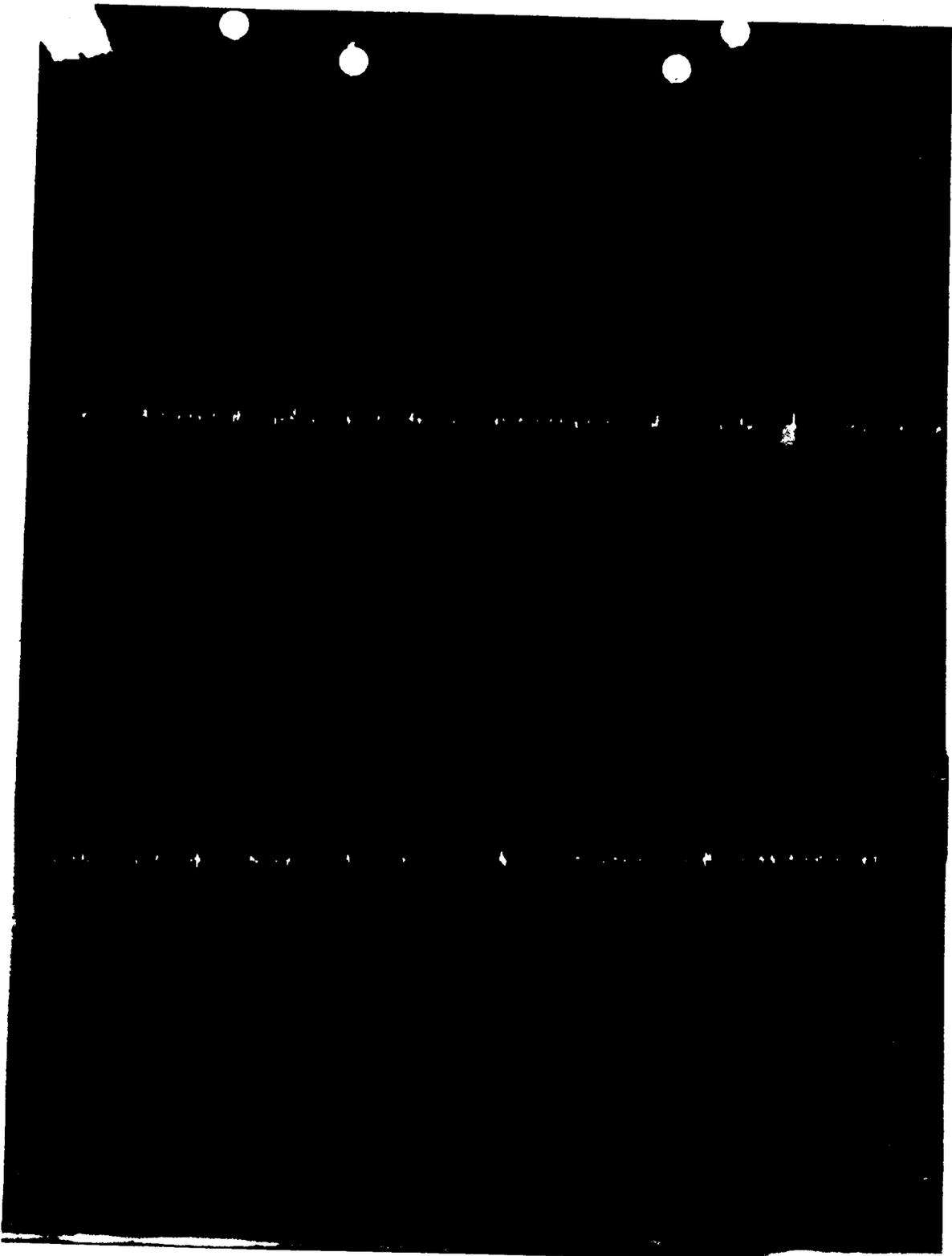
Case # 20. Borderline leukopenia, 50 N, 10 B, 36 L, 4 M.
Platelets adequate.

Case # 21. Normal, 55 N, 10 B, 24 L, 6 M, 5 E.
Platelets uncertain technically.

Case # 22. Severe Leukopenia, 30 N, 66 L, 2 M, 2 E.
Thrombocytopenia.

Case # 23. Leukopenia, 42 N, 6 B, 52 L.
Platelets uncertain.

Case # 24. Severe Leukopenia, 42 N, 4 B, 46 L, 6 M, 2 E.
Platelets uncertain.



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MEMORANDUM:

SUBJECT: Filing Communications Traffic at RABAU

1. Communications facilities for handling message traffic in and out of RABAU are commercial facilities similar to our Western Union.

2. For your information, message traffic filed at RABAU for JTF-7 Eniwetok would follow either one of the following routes:

a. To Melbourne for refile into the USAF AIRCOMMENT system at Okinawa.

b. To Melbourne for refile over RCA radio system to Honolulu, then into military system at Ft. Shafter.

3. It is suggested that upon arrival RABAU that you contact the commercial communications facility and advise them that you expect messages from JTF-7 or other sources, and that you can be reached at a specific address or telephone number. Any messages sent to you from JTF-7 will be addressed to you in care of the commercial communications facility.

4. If other more convenient arrangements can be made for filing and delivery of message traffic at RABAU after your arrival, advise JTF-7 so that specific address or other information can be included in the message address to insure your receipt.

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