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STAFF SURGEON - HQS JOINT TASK FORCE SEVEN

1958

DOCUMENTARY REPORT

ON

JAPANESE INTERNATIONAL GEOPHYSICAL YEAR SHIPS

TAKUYO MARU and SATUMA MARU

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TAKUTO MARU and SATUMA MARU

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DISTRIBUTION:

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DOCUMENTARY REPORT  
ON  
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TAKUYO MARU and SATUMA MARU

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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 SATIMA 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 66 milliroentgens between the dates July 8-19.

3. The radiation dose rates on both the TAKUYO and SATIMA 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

of the documentation, of the highest count rate recorded by the Japanese. An additional 2-3 millirems total may have been absorbed between this time and our arrival at Misaki (total 300 hours).

6. The infinite gamma dose, even with no documentation of the TAIHO, would have been an insignificant amount. Being Japanese data, the dose calculated to be about 85 millirems.

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

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

9. There is no evidence at this time of any detectable 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 intestinal illness.

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

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

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

**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. Lechausse, 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 able pass by CNO 171905Z 2 Maritime Safety Board ships now engaged in Pacific survey projects in connection ICH 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 scientists 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 180236Z 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 ALHMSA TOUTO 210218Z to CNO and information to CINCPACFLT (see Tab B, Appendix I): "By 162206Z, HSB reports some of crew of TANTU MARY losing white blood count as a result of radioactive fallout. HSB is formally requested aid in flying minimum of 10 and maximum of 51 of crew from Rabaul to Japan for treatment. HSB further requests aid in decontaminating ships in wooden dock 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 "MSB reports some of the crew of the TAKUTO MARU losing white blood count as a result of radioactive fallout..." and "...MSB informally requested aid in flying minimum of 10 and maximum of 31 of crew from Rabaul to Japan for treatment..." the Staff Surgeon and Commander Frederick W. 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 teletype message from General Alfred B. Starbird, DMA, AEC (see Teletype 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. Lockman, USAF (MG)  
Chief, Nuclear Medicine, Office of Surgeon General, Hq USAF  
Staff Surgeon, Joint Task Force SEVEN

Captain Roscoe E. Cooke, U.S. Public Health Service  
Health Physicist  
Radiological Safety Advisor, Task Group 7.3

Lt Colonel Carl L. Hanson, Jr., USAF (MG)  
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/AEC were received, including message Z12043Z (see Tab D, Appendix I) and Z12245Z 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 AEC, Washington, D.C., to Commander JTF-7 which arrived at the Raiwetok 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 (Raiwetok 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 SA-16 #51024 arrived Truk at 250645 hours local time (0745M). After refueling and breakfast, including one each chloraquin anti-malarial tablet for every member of the party (following greeting at the strip by Mr. Callanore, 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 (1009M). Arrival at Rabaul was at 251315 hours local time (1515M), a total of 12 hours 45 minutes elapsed time.

**B. RABAUL**

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 B. Fould  
Australian Territorial Administrator for New Britain Island  
Melling address: Australian Trust Territory  
Papua and New Guinea

Charles Hasler, M.D.  
Australian Regional Medical Officer, New Guinea Islands  
Melling address: Same as Mr. Fould's

And others

Mr. Gus Salles  
Reporter for RABAUL 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. Salles permitted us to depart for the hotel. Our group noticed that he had taken pictures as we departed.

After lunch and a perusal of Dr. Hasler's file of records which included original interviews (questions and answers) by him and Sub-Inspector Stewart, the team boarded the TATUHO MARU at the dock. We were accompanied by Mr. Fould, Dr. Hasler, 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. One Smiles from the deck. After a short exchange of greetings and handshakes proffered by our hosts, we were ushered below decks to the TAKUYO wardroom where we were joined shortly by the Captain of the SATUMI 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 Lechaussée'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 SATUMI 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. Hagalar 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 0800 on the following morning (Saturday). Instructions were given for collecting the 24-hour urine samples, and it was arranged that Captain Cooke 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. Faldi spent a very pleasant evening over coffee at the home of Doctor and Mrs. Hagalar.

26 July 1956. Saturday:

Our outlined plan of action was carried out as follows:

0800 All team members boarded the TAKIHO 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 Cooke 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 Cooke 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, "macroweek".

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, Lechausse 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 Cooke 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 1948. 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 two cars and drivers—throughout our stay in Rabaul. The skipper was at Mass.

0900      Boarded TAKUYO after being ferried from dock by her launch which was sent in for us when they noticed us waiting on the dock. 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. Hansen and Captain Cooke 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 TAKUO 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.



[REDACTED]

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 TAKUYO 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 221643Z from USABO, Tab G, Appendix I.) These were G-5 roentgens, self-reading, quartz fiber electrometer type, officially designated as Bendix Model #611, Series B. The numbers of these instruments are recorded in Tab G, Appendix VII. Captain Cooke 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, Rare" 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 Lansuh 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 Baslers on a motor tour of the Casselle 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. Basler, the family groups sitting at the roadside and the noticeable foot traffic on the roads is the usual Sunday routine for the natives. Whenever 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. Hasler, was apparent.

With a view toward returning in small measure the personal attention and many courtesies and kindnesses extended to us by the Foidls and the Haslers, 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 Foidls were unable to accept.

After cocktails at the hotel, while taking care of our hotel bill, Dr. Hasler 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. Foidl.

At this time, Mr. Gus Sillis again engaged us in conversation. During the course of this conversation, he advised one of us (Lechussee) 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 Lechussee

■

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 filling dispatches. In response to a direct question from Mr. Smiles as to how long we would remain in Rabaul, Colonel Lechausse 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. Haszler, Colonel Lechausse 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 Haszler 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 Lechausse 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 RABAUl AND RETURN TO ENGLAND

28 July 1948, 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. Field and Dr. Haszler and Mr. Gus Smiles.

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0600      Boarded aircraft after formal and personal good-byes.  
0615      Wheels up  
1415 local Arrive Pense (Rafuel)  
1515 local Depart Pense  
1800H      Arrive Eniwetok  
1845H      Arrive Parry  
1900      Colonel Lechasseur, 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 Z.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. Hasler (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 so 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 MANU 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 1.42 mg/cm<sup>2</sup> thickness for beta measurement. Accessory equipment was an amplifier and scaler unit. Efficiency was said to be 9.6%.

The scintillation counter probe encloses a NaI crystal of 1 1/2 inches diameter and 1 1/2 inches in length, and a Densit photo multiplier tube in a steel pipe 7.6 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 500 cpm was equivalent to 0.7 millirems per week.

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

Scintillation counter 3515 cpm gamma (equivalent to 0.03 mr/hr)

NE-5: 0.045 mr/hr gamma

The equipment on the SATUMA VAMU consisted of one laboratory type Geiger counter similar to that on the TAKURO, and one 0-300 milliremper hour self-reading dosimeter and charger. The dosimeter was of Japanese manufacture and similar to our Kolmogor 0-300 milliremper hour 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 dose of 26 millirems from 8 to 15 July, and 20 millirems from 15 July to 19 July.

There was no air sampling equipment aboard either ship. The water for the air data (cpm per cubic meter) listed on the ship count 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 TAKUTO ran through a rain squall between 2000 and 2300 hours, Japanese Standard Time, 16 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 element" and flushing with fresh water, the maximum count was 26,235. 37,468 cpm is equivalent to 0.31 mr/hr (using their figures of 900 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 0930 hours, 15 July. Decks and equipment were washed with "neutrality element" 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 GCV-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 7.3 Rad-Safety organizations. On return to Eniwetok the calibrations were confirmed. A background dose-rate reading, taken at 2300

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hours, 23 July, outside our quarters in Rabaul, was established to be 0.06 to 0.07 m/hr beta and gamma. This figure was confirmed at the Rabaul Public Health Authority Medical Clinic on 26 July.

Both the TARUO 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 MC-5 instrument. Readings were essentially background on both ships. Similarly, the interior spaces were monitored. This included officers and crews quarters, mess, bunks and heads, the galleys, the wheelhouses, the chart room, the laboratories, and such spaces as paint, shells and storage lockers. The readings in these interior spaces on both ships were lower than background. While many of the crew members followed Captain Cooks because of curiosity, Chief Mate Oyama of the TARUO 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 gunlight showed radioactivity. The readings were 10 m/hr beta-gamma and 1.2 m/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 quiet 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: MX-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
Rope coil on deck	0.07
Wet bumper coil	0.07
Canvas cover over steel cable	0.07
Forepeak Spaces - Enclosed	
Paint locker	0.03
Stowage locker	0.02
Chain locker	0.03
Deck awning (in place on 14th)	0.09 Rolled up at )
Coil fire hose	0.07 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)
Boat 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
Lifboat - canvas top - aft - starboard	0.10
Engine room ventilator area	0.06
Lifboat - canvas top - forward - port	0.09
Vegetable locker - painted canvas	0.08

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Location

Reading  
mR/hr

Roop Deck - Enclosed  
Captain engine space - deck  
Bape Cell  
Steering engine room sily floor

0.05  
0.06  
0.06 Hatch only)  
entrance )

Quarters - Enclosed

Crew's mess - benches and tables  
Deck  
Clerk's room - deck  
Crew's head  
Officer's head  
Officer's bath  
Officer's mess  
VIP quarters - rugs and chairs

0.04  
0.04  
0.05  
0.05  
0.04  
0.05  
0.05  
0.04

Work spaces - Enclosed

Laboratory - work tables and floors  
Wireless room - deck  
Galley - floors and work areas  
Observation room (Scientific) - chairs,  
work space, desks  
Wheelhouse - deck  
Flying bridge - portable canvas cover

0.05  
0.05  
0.05  
0.05  
0.05  
0.06  
0.05

Upper bridge - Exposed

Deck grating - wood  
Compass cover - canvas  
Instrument cover - canvas

0.07  
0.08  
0.08

Miscellaneous

Engine room - sea station  
Air exhausts into room

0.05  
0.04

2. Radiation Readings - SATIMA MARS

Date: 7-26-56

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

Background labors: 2200 hours, 25 July 1956:


0.06-0.07 mR/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>mp/hr</u>
<b>Forecastle - Exposed</b>	
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
<b>Boat deck - Exposed</b>	
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
<b>Weather balloon hatch - canvas cover</b>	
	0.07
<b>Upper deck - Aft - Exposed</b>	
Winch cover - canvas	0.05
Canvas awning - not up during trip	0.05
Japanese flag - flew during trip	0.05
<b>Pantail deck - Exposed</b>	
Vegetable locker	0.05
Coil rope	0.06
Deck - steel	0.07
<b>Quarters - Enclosed</b>	
Crew's head - deck	0.06
Crew's bath - deck	0.05
Officer's head - deck	0.04
Officer's bath - deck	0.04
Furber'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
<b>Work space - Enclosed</b>	
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
<b>Miscellaneous</b>	
Sea suction pipes	0.05
Air exhaust in quarters	0.04

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<u>Location</u>	<u>Reading</u> <u>mr/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):

	Gross Beta Activity dis/ min/ ml
TAKUYO	
Tokyo water	0.7
Tokyo and Rabaul water	1.3
SATUMA	
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.

**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.  $I = I_1 t^{-n}$
3. Dose =  $\frac{I_1}{2n-1} \left[ t_1^{1-n} - t_2^{1-n} \right]$

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.  $n = 1.2$
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 0030 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:

$$I = \frac{37470(0.7)}{500 (168)} = 0.31 \text{ mr/hr}$$

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

$$t = 55$$

$$\text{Dose to Infinity: } t_2 = \infty (\text{Infinity})$$

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

$$\text{Dose to Monitoring: } t_2 = 900$$

$$D = \frac{38}{1.2-1} [55^{0.2} - 900^{0.2}] \\ = \frac{38}{0.2} [0.449 - 0.319] = 25 \text{ mr}$$

$$\text{Dose to End First Decontamination: } t_2 = 70$$

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

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

$$37,470 - 2400 - 11,235 = 23,835 \text{ cpm}$$

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

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

$$\text{Dose to End First Decontamination: } t_2 = 70$$

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

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[REDACTED]

#### 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.

[REDACTED]

## 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 TAKUTO MARU'S physician. (See records on Akagi and Mikuma; 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 ME-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 TAKUTO MARU'S doctor and by

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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 (examining 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 organics 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 Harigoring, USA (MC)  
Walter Reed Army Institute of Research  
Washington, D.C.

For examination for any possible radioactivity.

2. Urines (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,

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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.

#### 6. 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 SATUM and four from the TAKUTO. (See Tab B, Appendix V, for

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[REDACTED]

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

**B. CALCULATED DOSE TO PERSONNEL**

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

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

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

**C. SUMMARY AND CONCLUSIONS**

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



[REDACTED]

Any complaints of illness subsequent to 24 July 1958 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 76%, 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 incriminating radiation insult as a result of this present exposure.

**CHAPTER V**  
**FINAL RESULTS AND CONCLUSIONS**

Since the dose rate by our own instruments at the time of our arrival was so small as not to permit any feasible 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 on the MATUDA 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 50 millirems between the dates July 8-19.

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

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

5. The maximum radiation dose possible to TAIJYO personnel is calculated to be less than 5 millirems. This assumes continuous exposure for the 15 hours from start of the run equal to the end

[REDACTED]

of the decontamination, at the highest count rate recorded by the Japanese. An additional 5-3 millirem (total) may have been absorbed between this time and our arrival at Minami (total 300 hours).

6. The infinite gamma dose, even with no decontamination of the YAKUTO, would have been an insignificant amount. Being Japanese data, the dose calculated to be about 85 millirem (total).

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

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

9. There is no evidence at this time of any detectable 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 intestinal illness.

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

12. There was no detectable 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.

CHAPTER VI

GENERAL COMMENTS

A. COMMENTS ON AUSTRALIAN RECORDS AND DATA

1. Ref: RMD 3/4/1978, 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 millirentgens" 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 Matinhare is reported in the local (Rahaul) 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. References next paragraph below and page 4 story, RAHUL 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. References RMD 3/4/1950 dated July 24, 1958, paragraph 8,

[REDACTED]

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

2. Ref: HMB 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 50.4 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.

[REDACTED]

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 Eniwetok 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 HOSING, 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 Gumm 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 Gumm. 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 Macleod in regard to radiation sickness, we feel that the 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 coincidental



[REDACTED]

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

CR 5516

TOR 19/1109Z/JP

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 SHIPS NOW ENGAGED IN PACIFIC SURVEY PROJECTS IN CONNECTION IGY HAVE REPORTED HIGH LEVELS OF RADIOACTIVITY IN VICINITY OF TRUK. SHIPS HAVE INFORMED MSB OF 19,000 COUNTS PER LITER AND SEA WATER RADIOACTIVITY OF 247 COUNTS PER LITER PER MINUTE. VERNACULAR PRESS HAS 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 RABAU 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/rdd

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CR 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/COMNAVORJAPAN/  
CINCPAC

"MY 162206Z X MSB REPORTS SOME OF CREW OF TAKUYO MARU LOSING WHITE BLOOD COUNT AS A RESULT OF RADIOACTIVE FALLOUT X USS INFORMALLY REQUESTED AID IN FLYING MINIMUM OF 10 AND MAXIMUM OF 51 OF CREW FROM RABAU TO JAPAN FOR TREATMENT X MSB FURTHER REQUESTS AID IN DECONTAMINATING SHIPS X WOODEN DECK AND CANVAS AWNINGS REPORTED TO BE TROUBLE SPOTS X AMEMB CONCERNED AND RECOMMENDS MEDICAL AND DECONTAMINATION ASSISTANCE X AUSTRALIAN 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

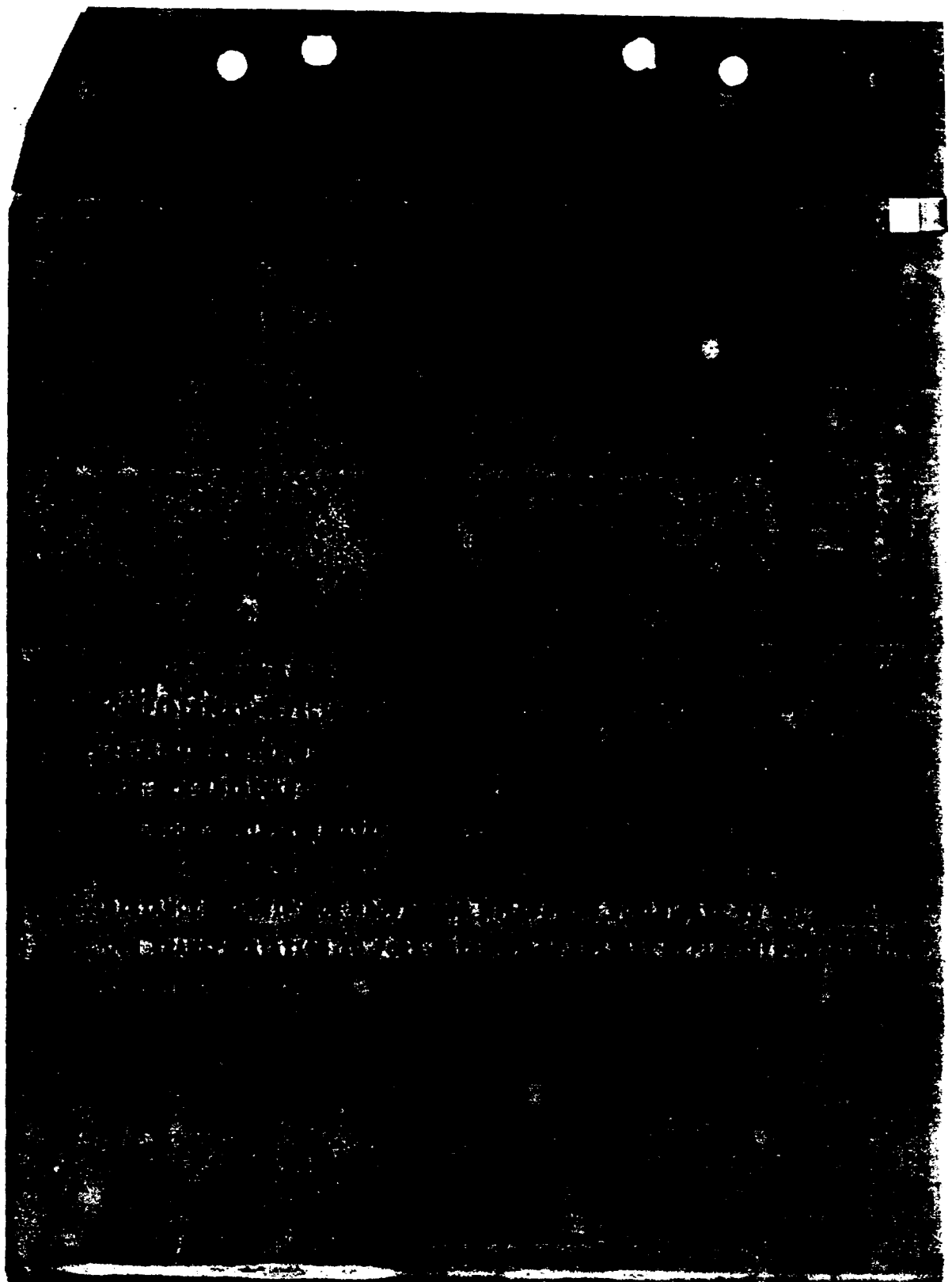
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TOR: 21/2235M

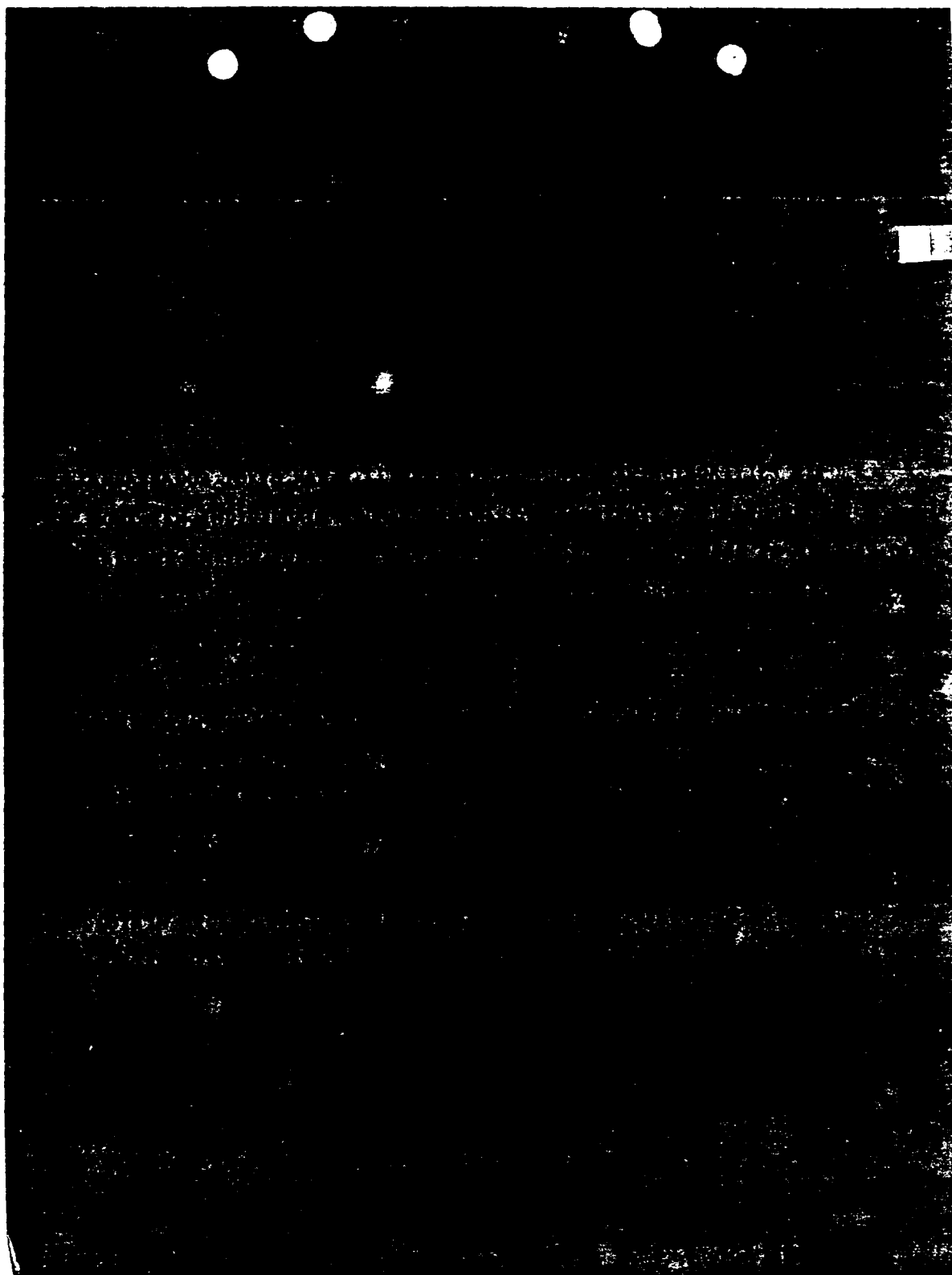
DTG: 210812Z

TDG: 210218Z/rdd

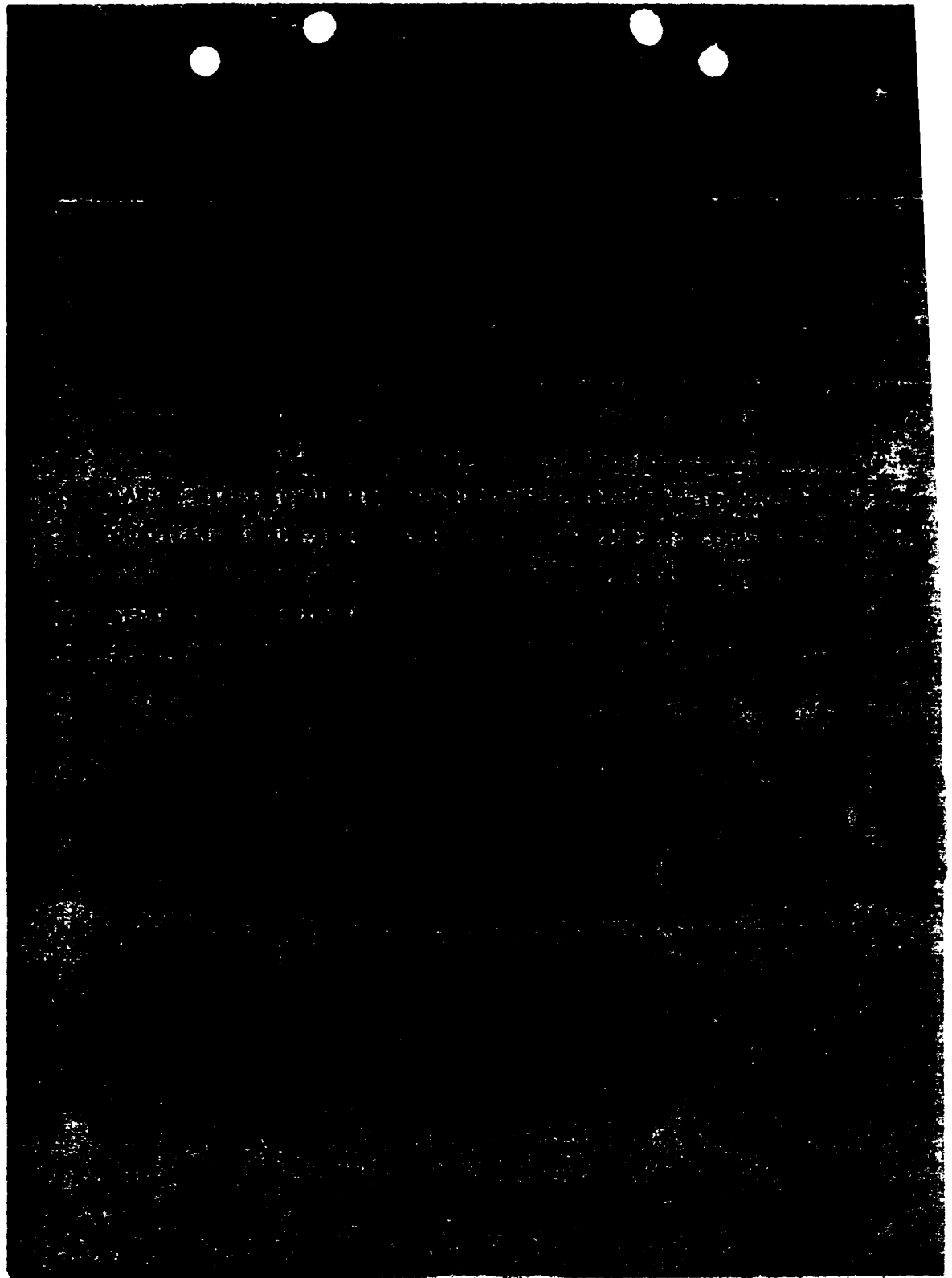
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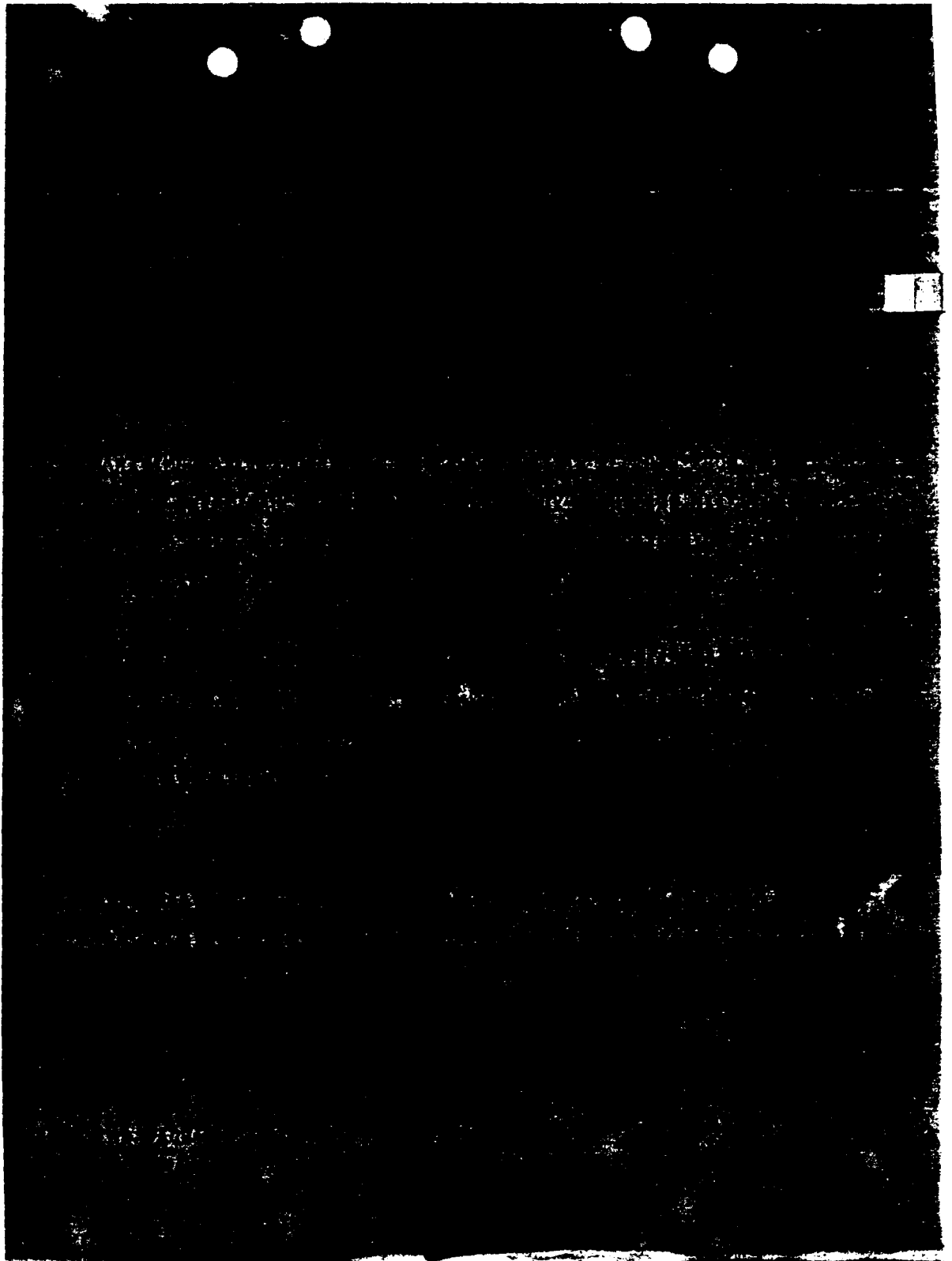
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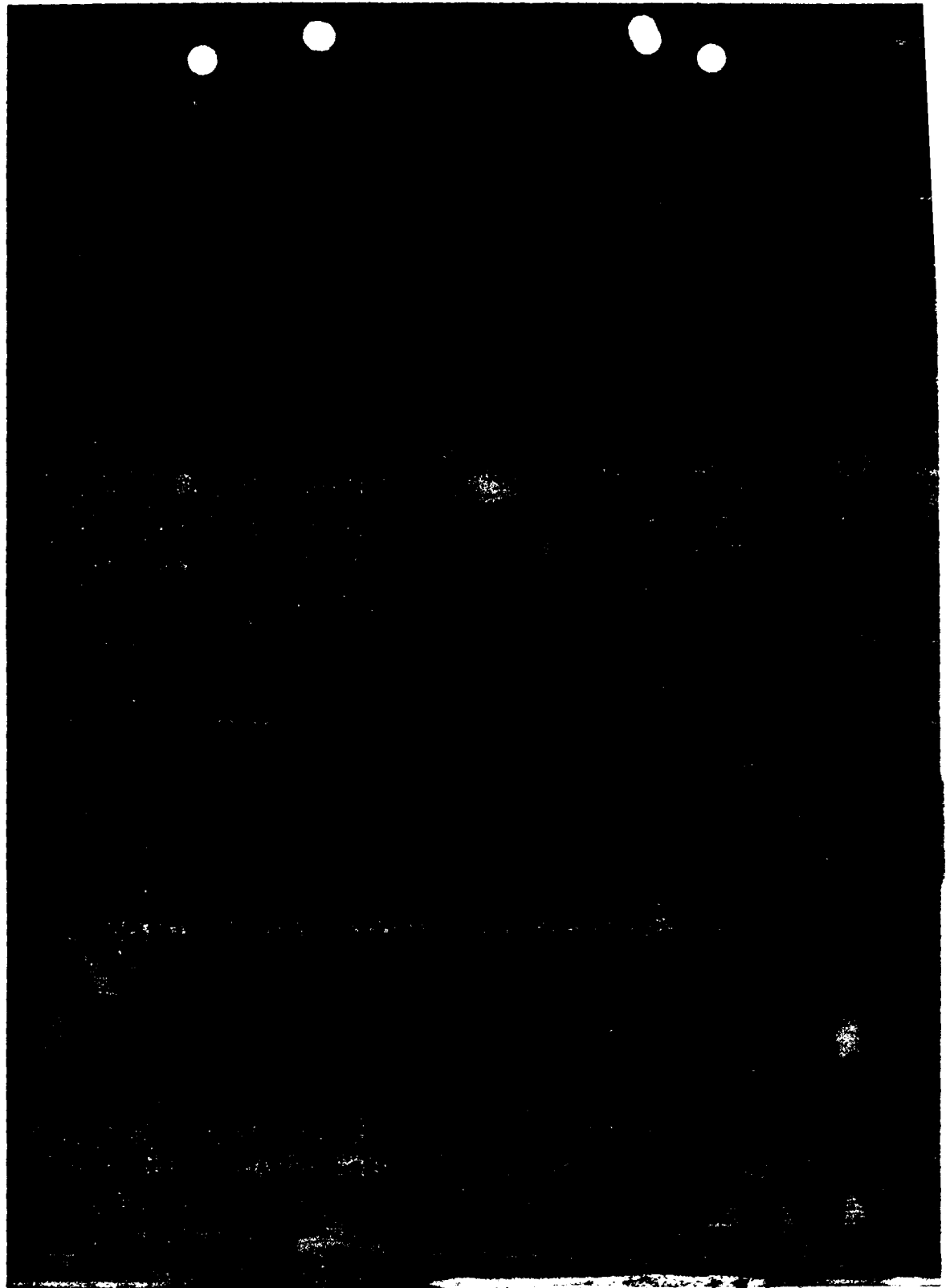
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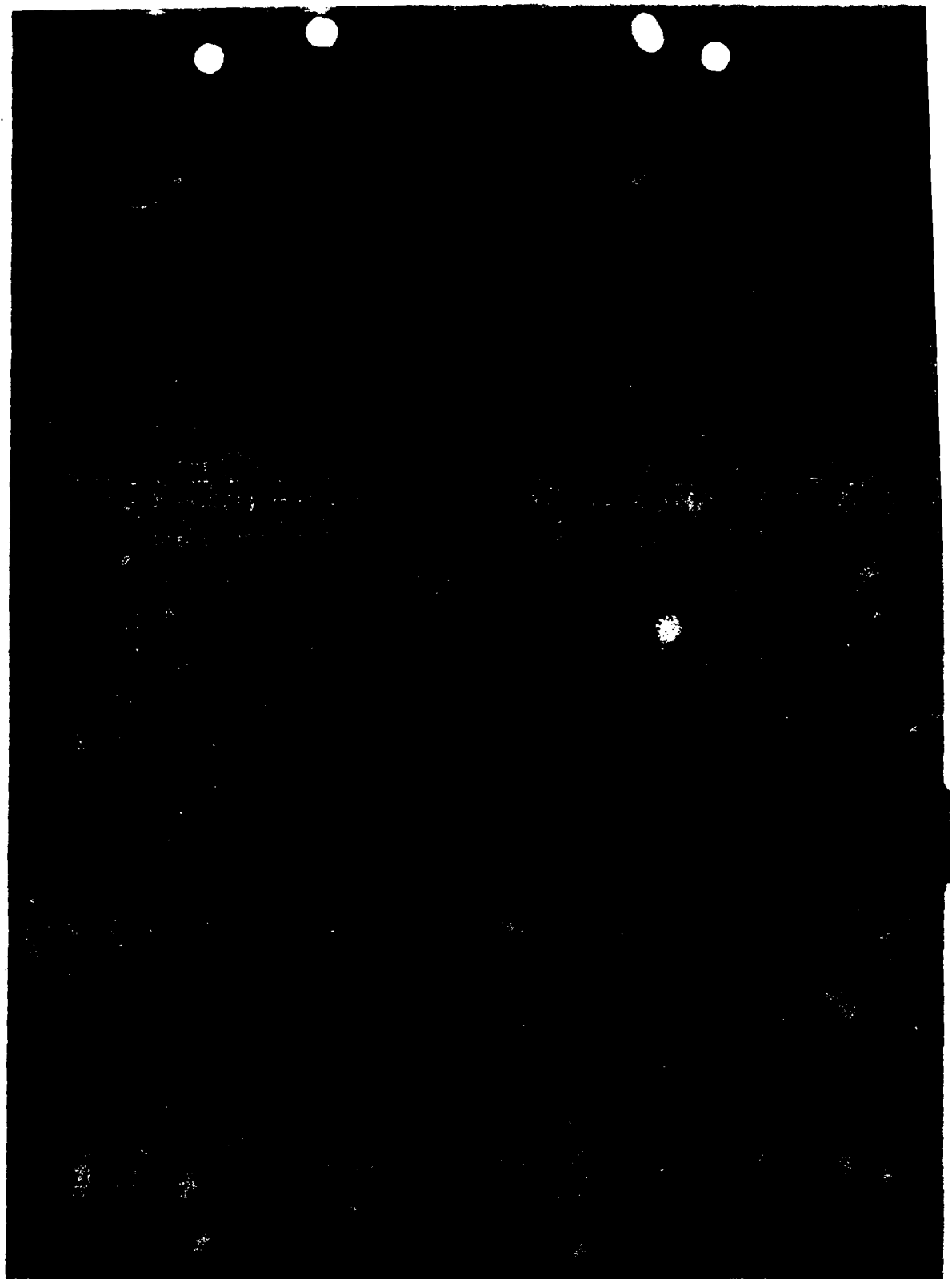


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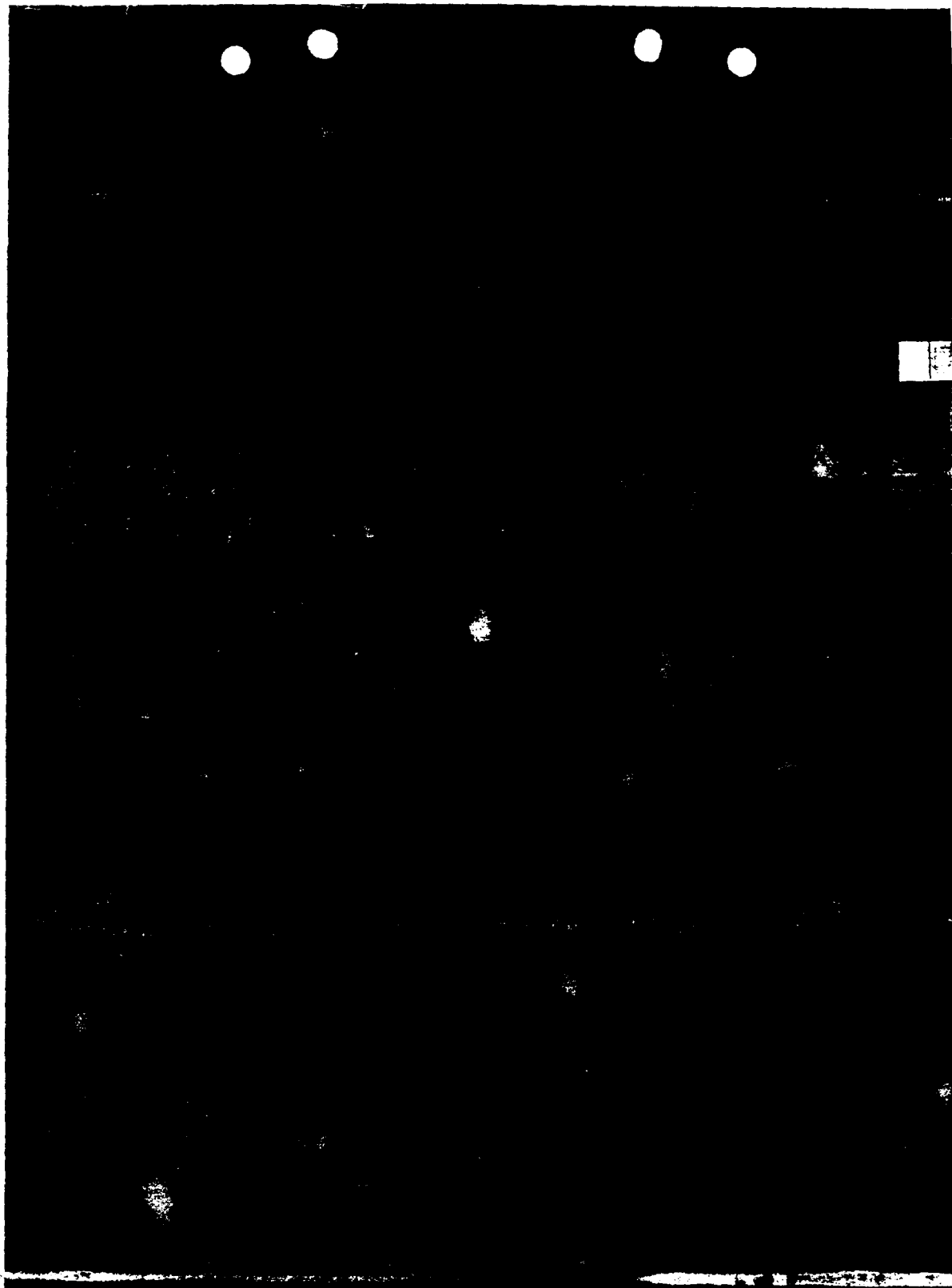


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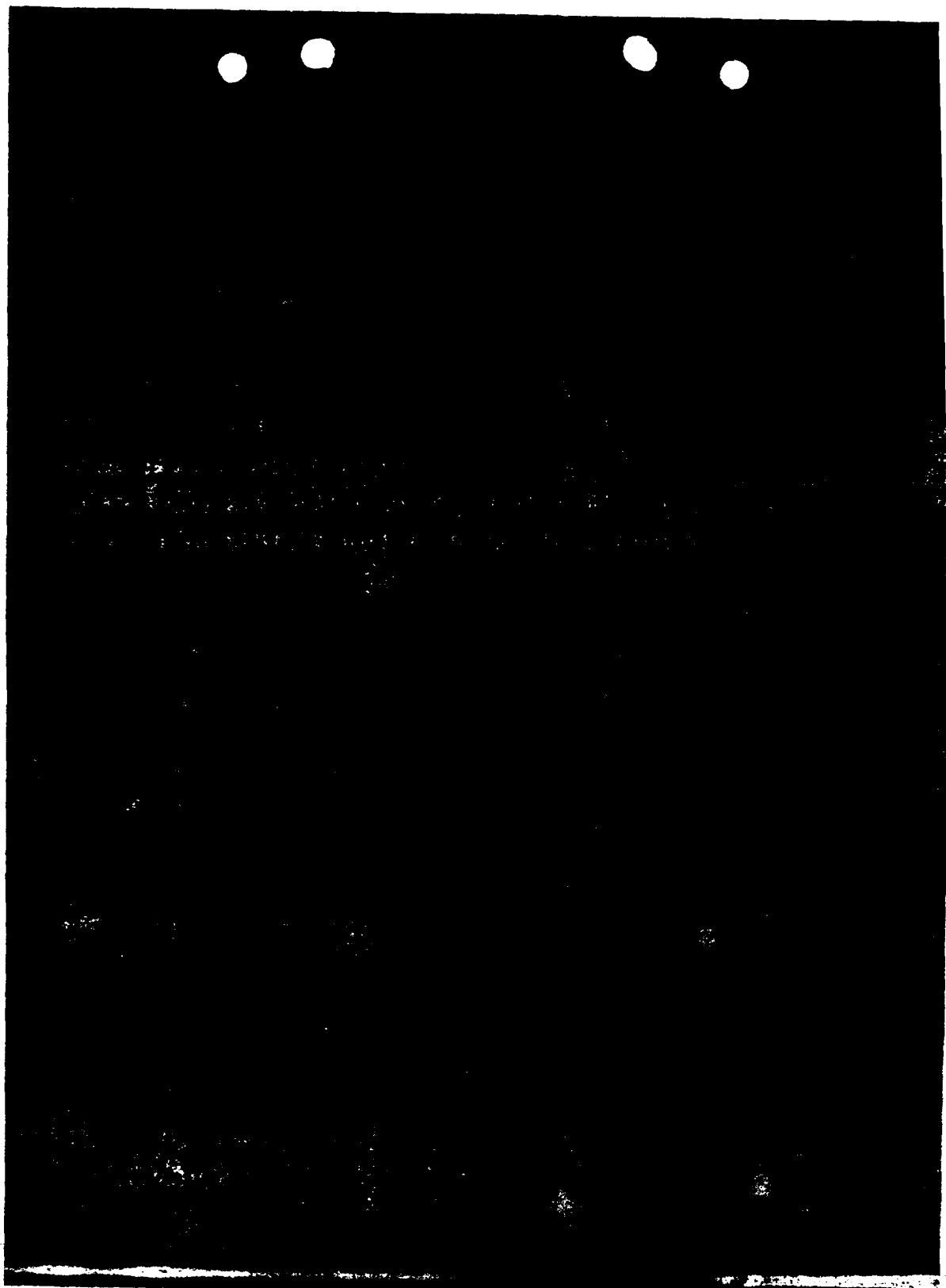




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ITEM NBR 8.  
OFFICIAL/CONFIDENTIAL  
FOR LEDGER

FROM LEBROCK

CONFIDENTIAL//PASS TO STABIRD:

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

LECHAUNSE, RALPH M./NEWARK (ESSEX) N.J. 7 SEP 1906 X YES X HQ JTF-7 X  
COL 20618A USAF

COCKE, ROSCOE H. 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. 13 APRIL  
1923 X YES X TG 7.4 FAR ELEMENT X LT COL USAF 15564A

FLEMING, RUSSELL A. CO-PILOT X LOS ANGELES (LOS ANGELES) CALIF.  
16 JAN 1932 X YES X TG 7.4 FAR ELEMENT X 1ST LT USAF AO-9023310

VILLARD, ERNEST H. III (NAVIGATOR) X KNOXVILLE (KNOXVILLE) TENNESSEE  
5 JUNE 1927 X YES X TG 7.4 FAR ELEMENT X CAPT USAF AO-991284

WARD, JAMES F. (RADIO OPERATOR) X HOMES, FLORIDA 6 MAY 1927 X YES X  
TG 7.4 FAR ELEMENT X SSOT USAF AF44113670

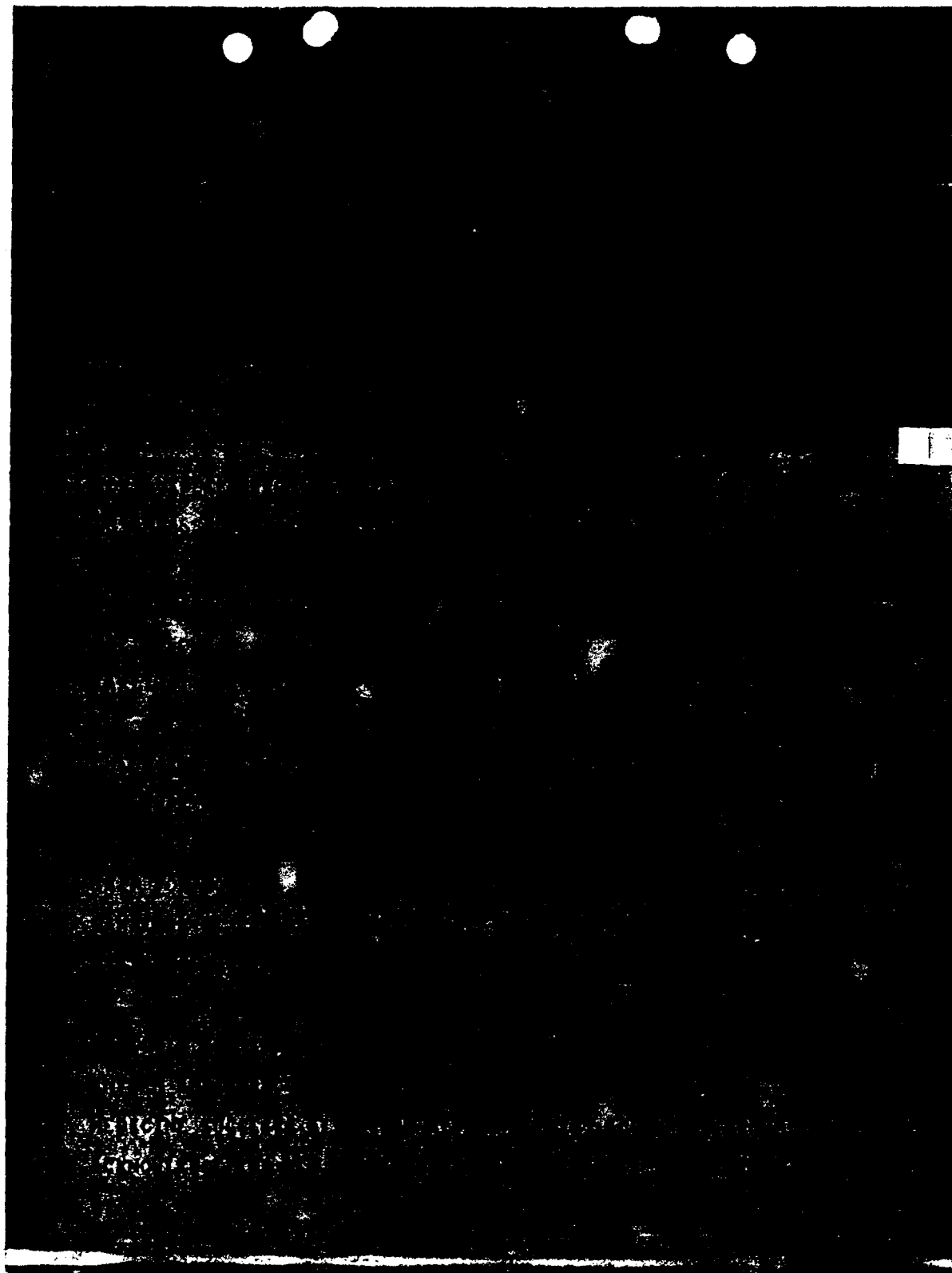
BORING, JOHN G. (FLT ENG) X VINTON, OHIO, 26 NOV 1932 X YES X TG 7.4  
SSOT, USAF AF-15296125

AIRCRAFT SA-16 NUMBER 51024 FLYING TIME WETOK TO TRUK 5.20 TRUK TO  
RAFAEL 5.40

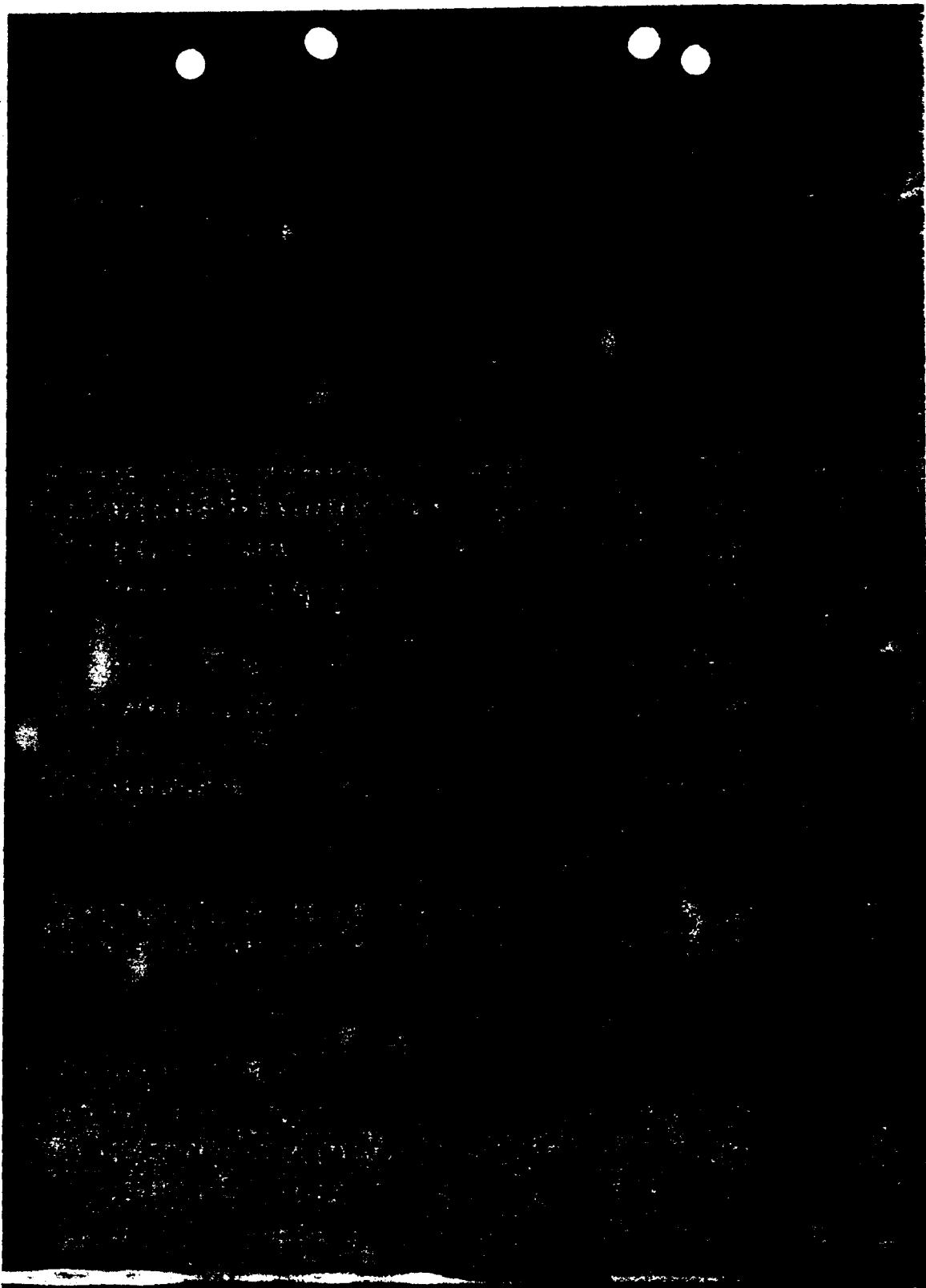
CORRECTION: ADD DATE OF BIRTH LT COL HANSEN AS "23 Jan 1920".  
END ITEM NBR 8.

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

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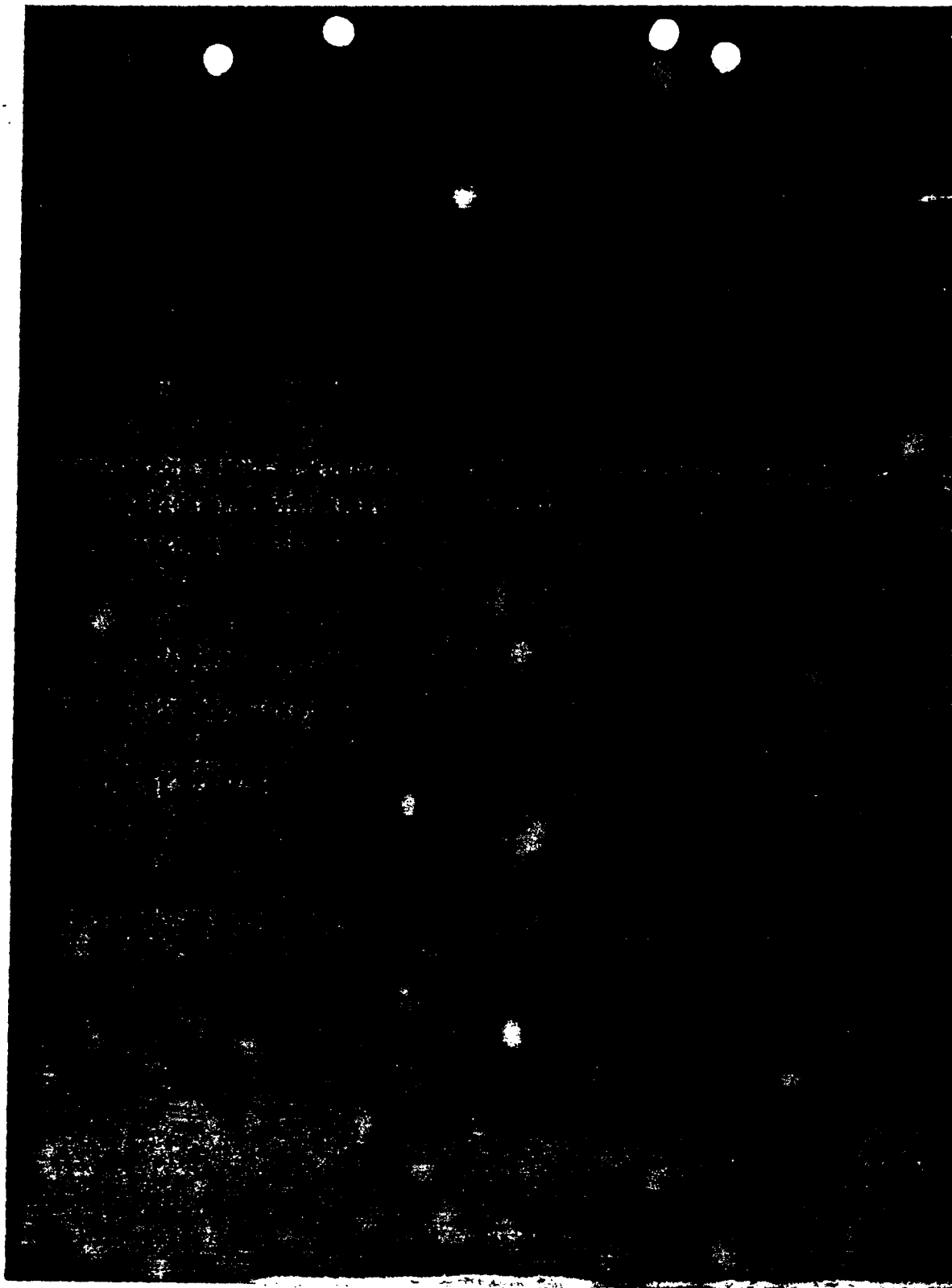


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SECRET

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NO UNCLASSIFIED

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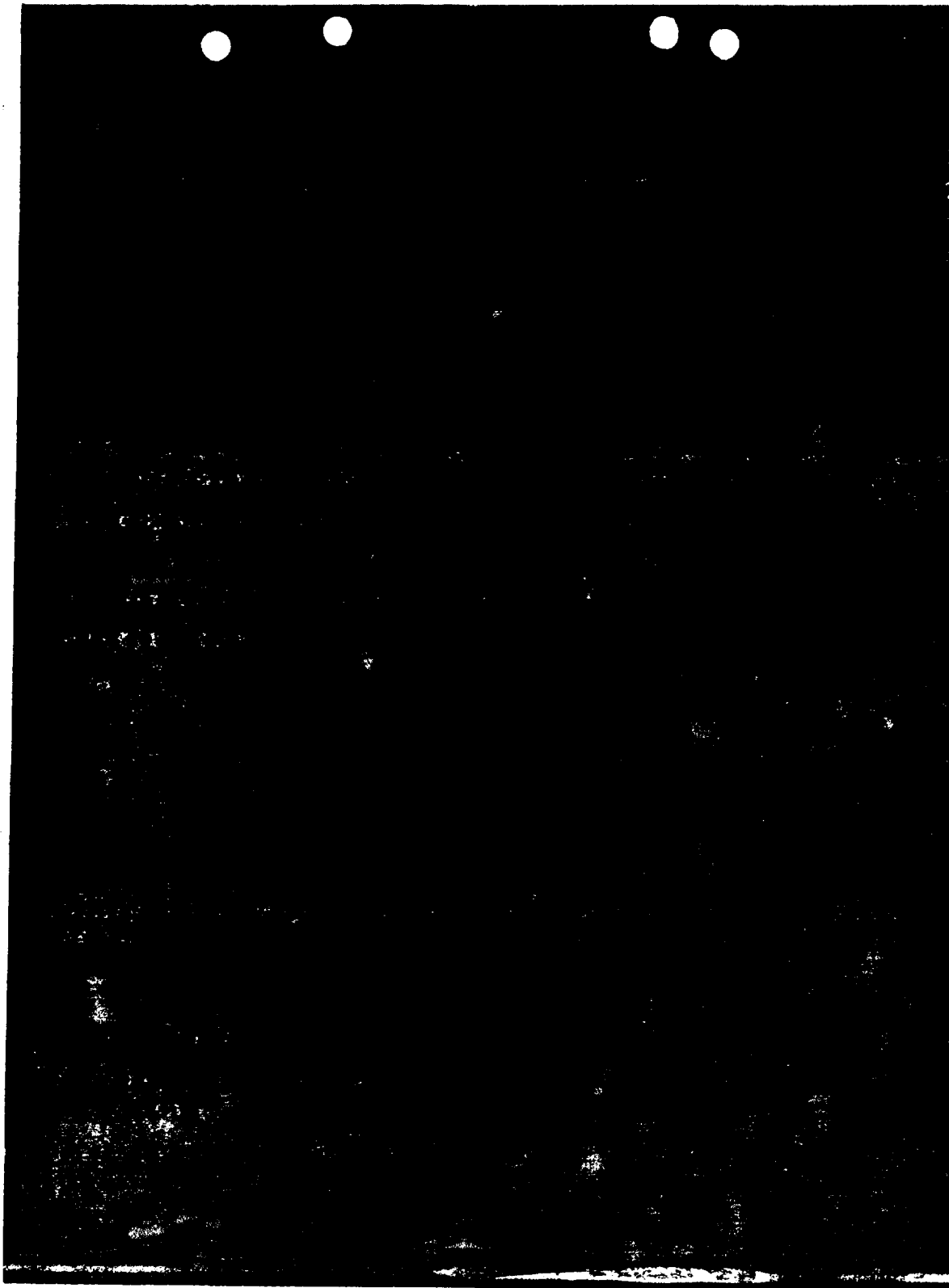
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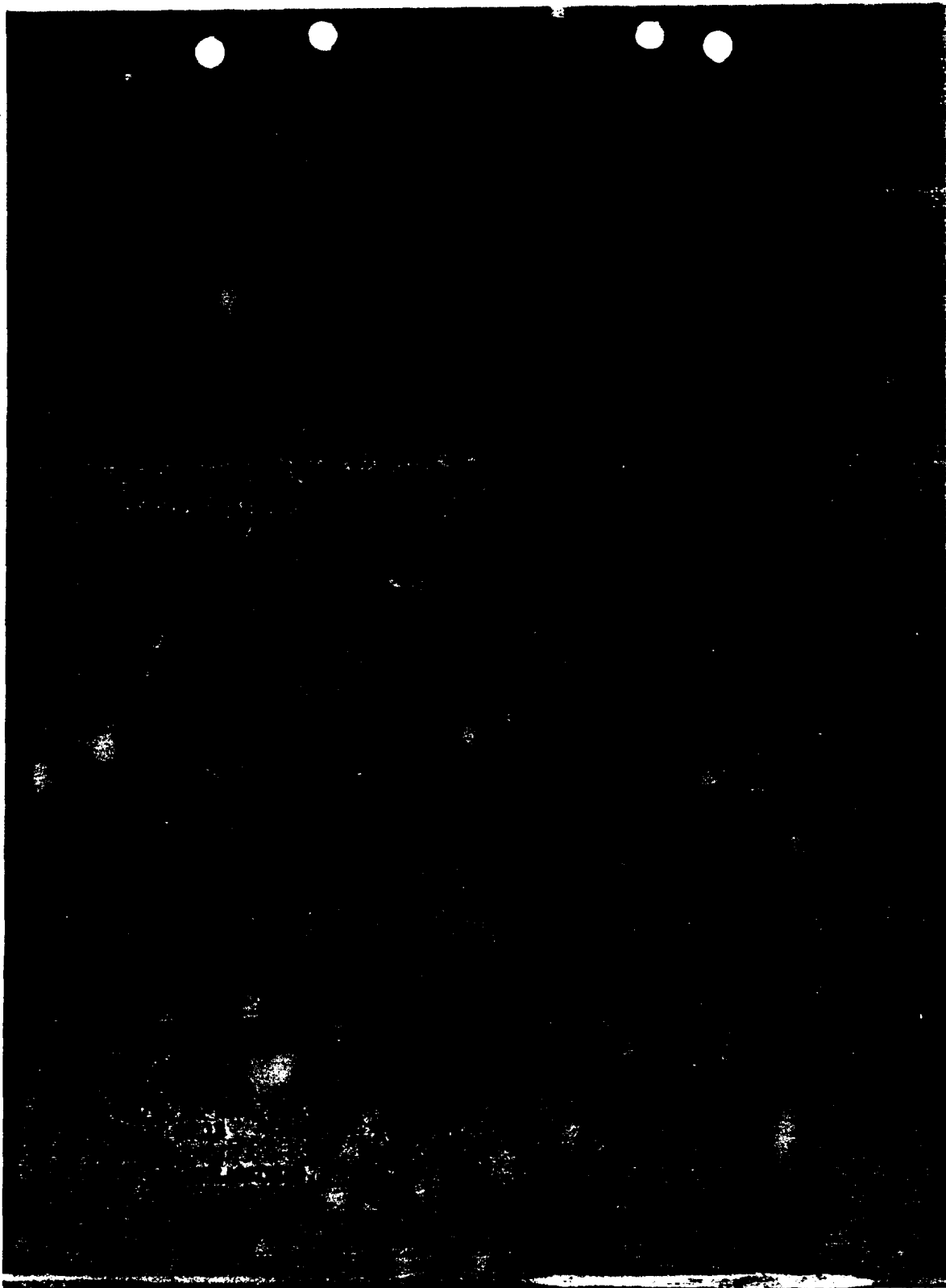
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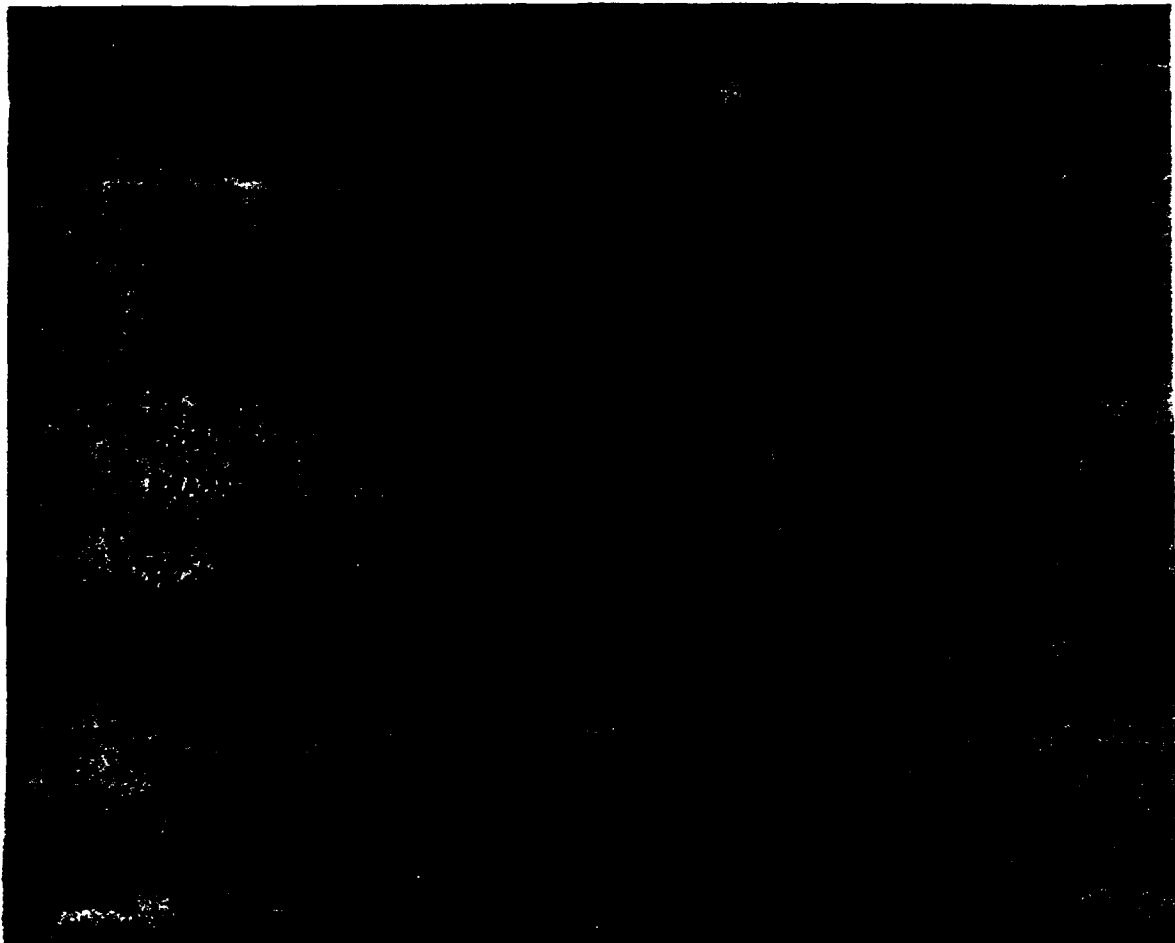
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OR 344

FOR 240000Z JULY/78

OPERATIONAL IMMEDIATE

240043Z (INFO 232210Z)

FM: AFG WASH DC

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

INFO: CINCPAC // HQ USAF ATTE AIRSOUTH // SECDEF FOR LOPER

(HRC-234)

FOR TIKK FROM STARBIRD INFO LUEDBCKE.

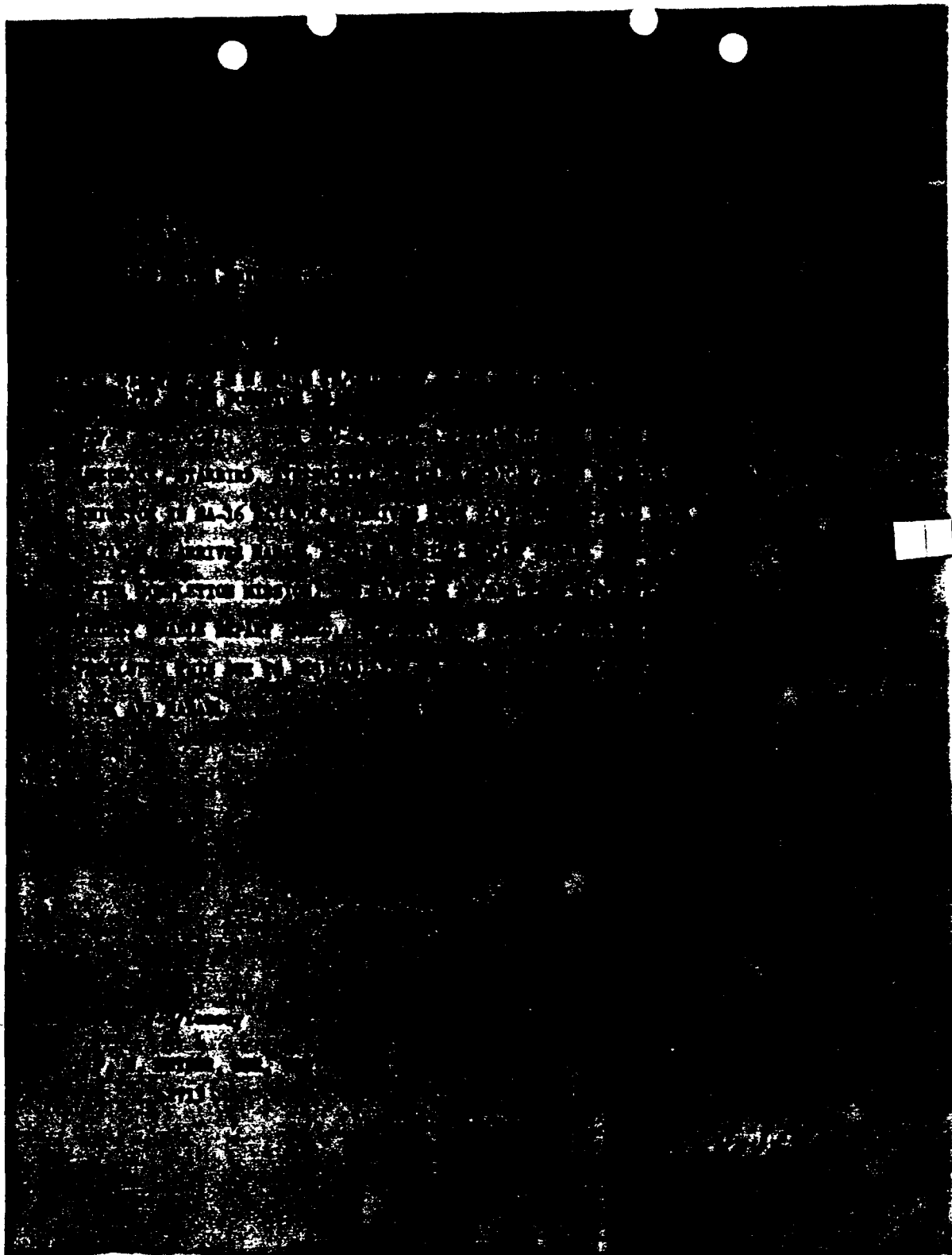
STATE DEPARTMENT ADVISES THAT AMBASSADOR BEALE, AUSTRALIAN AMBASSADOR TO  
U S, HAS AUTHORIZED ENTRY INTO RABAK OF US AIRCRAFT WITH CREW AND  
MEDICAL TEAM. YOU ARE HEREWITH AUTHORIZED TO DISPATCH AIRCRAFT IN  
ACCORDANCE WITH YOUR PLANS AS STATED IN SEVERAL MESSAGES TO ME. BEALE  
REQUESTS ASSURANCE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

ACTION: COMB  
INFO: 3-3, 3-4, SEURO  
LOG NR: 9041

FOR: 24/1519Z July 78

DTG: 240043Z  
TDTG: 232210Z/MT

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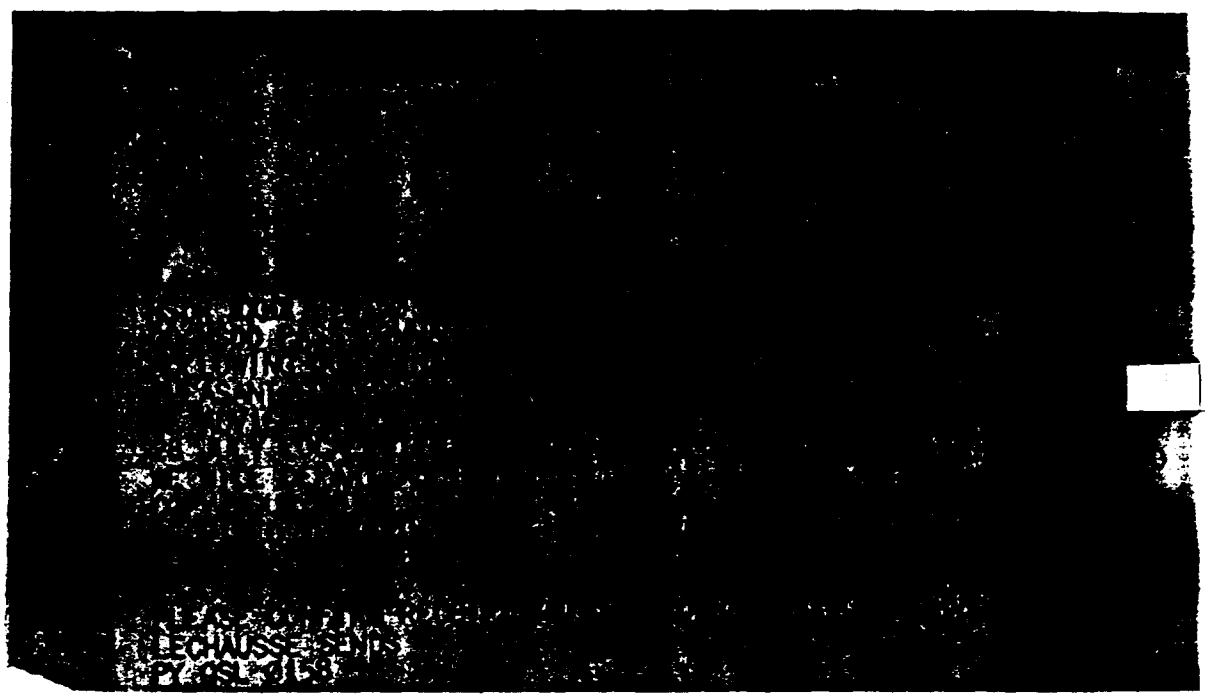


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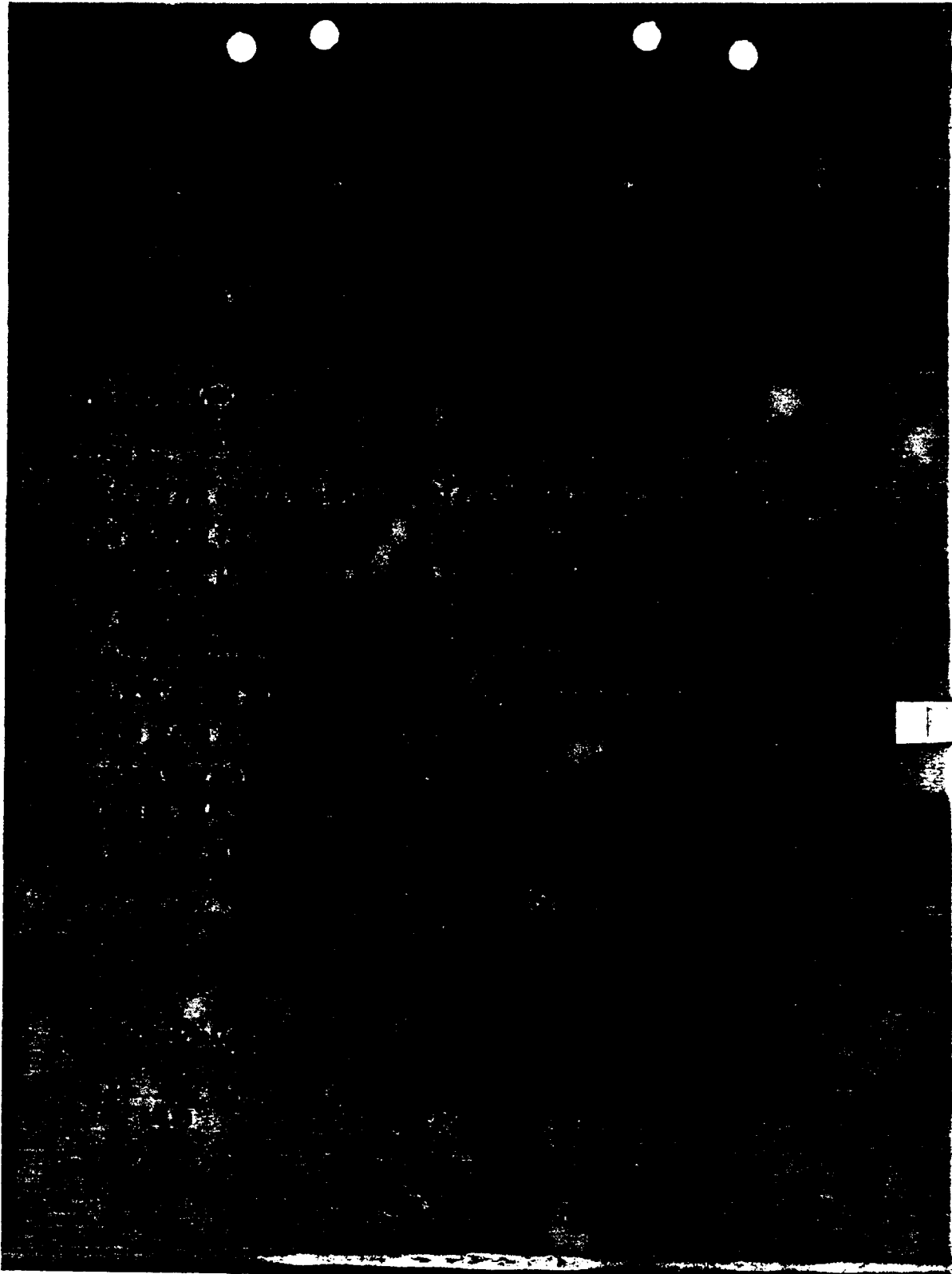
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784

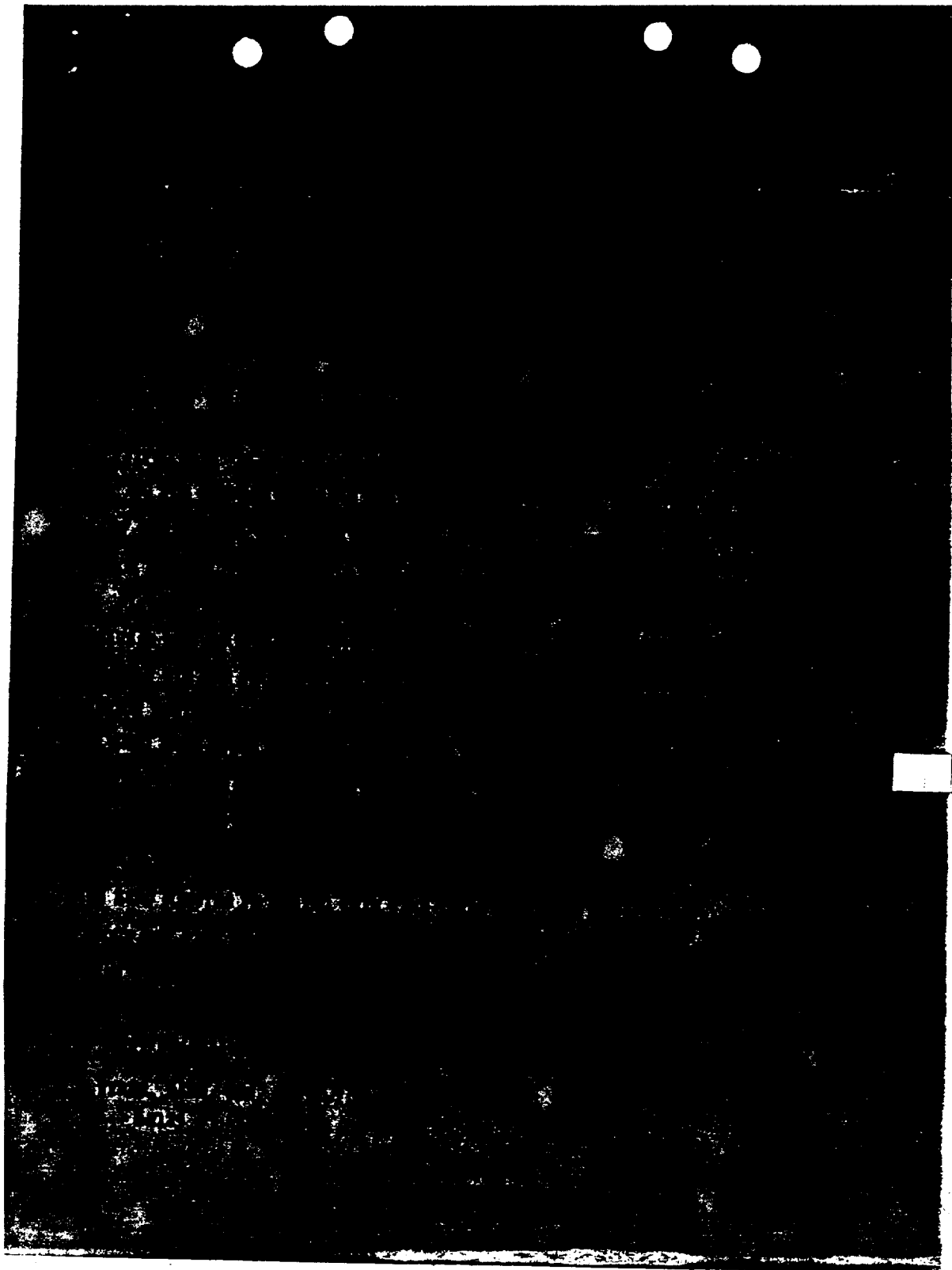


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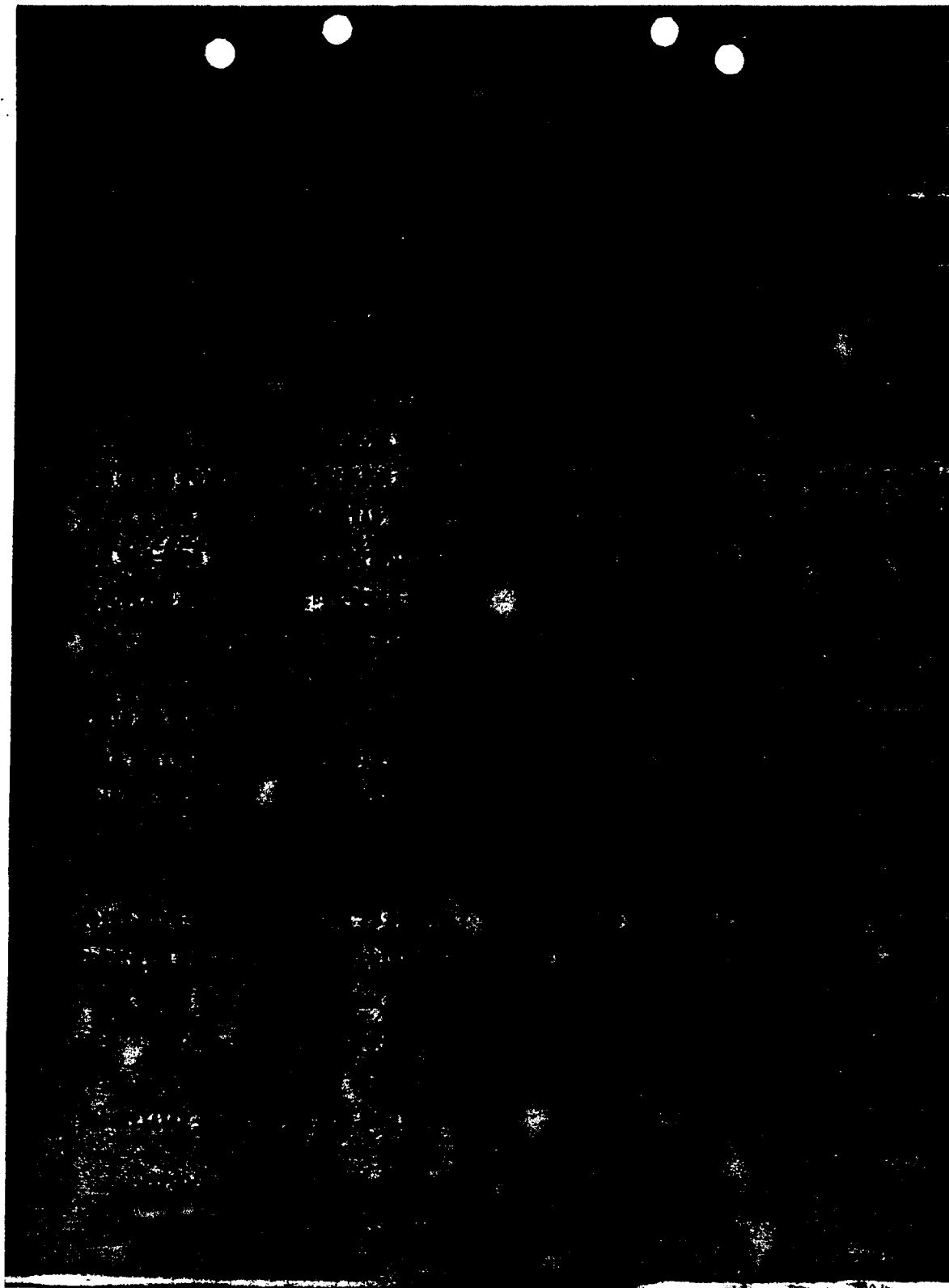


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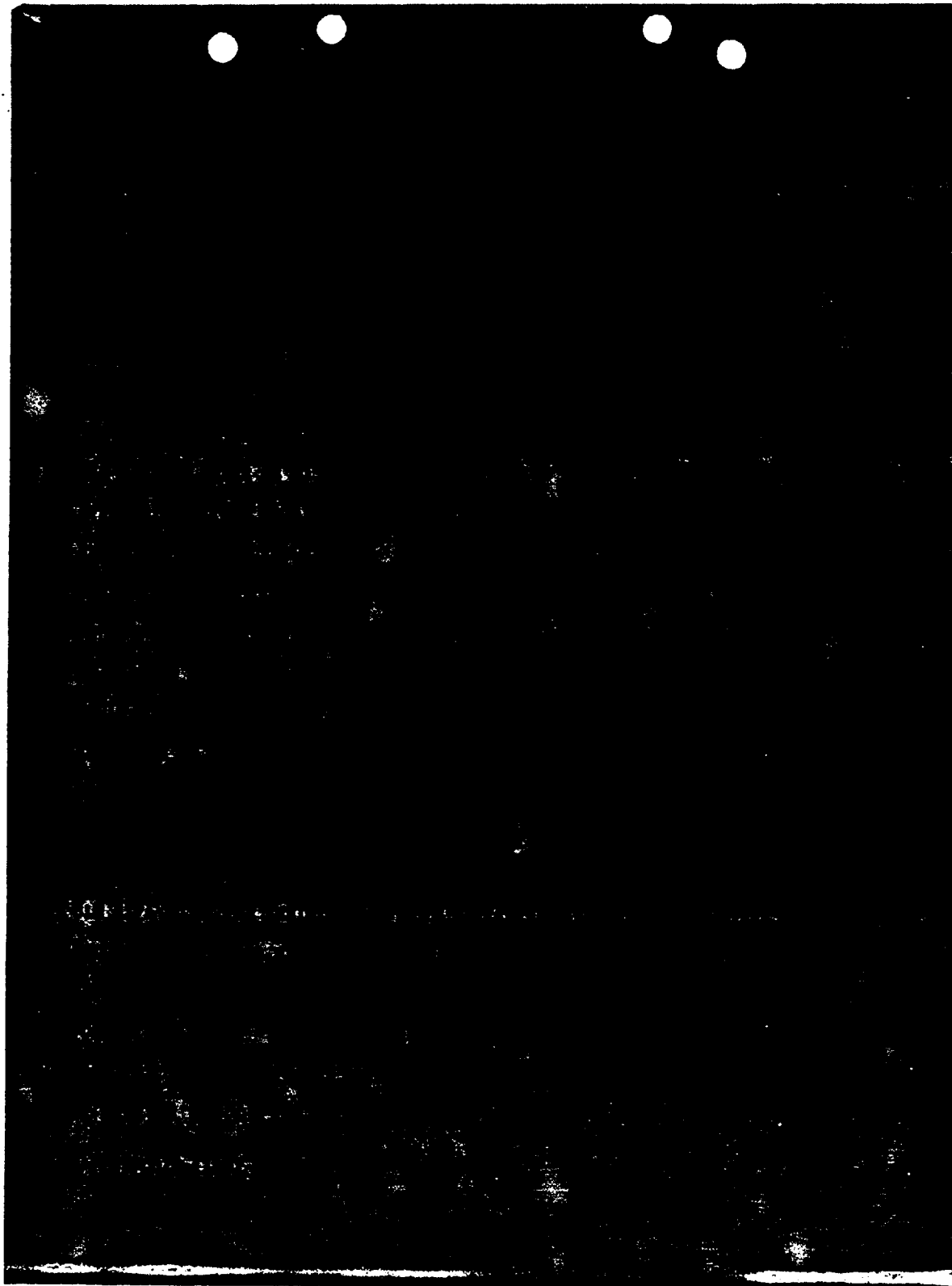
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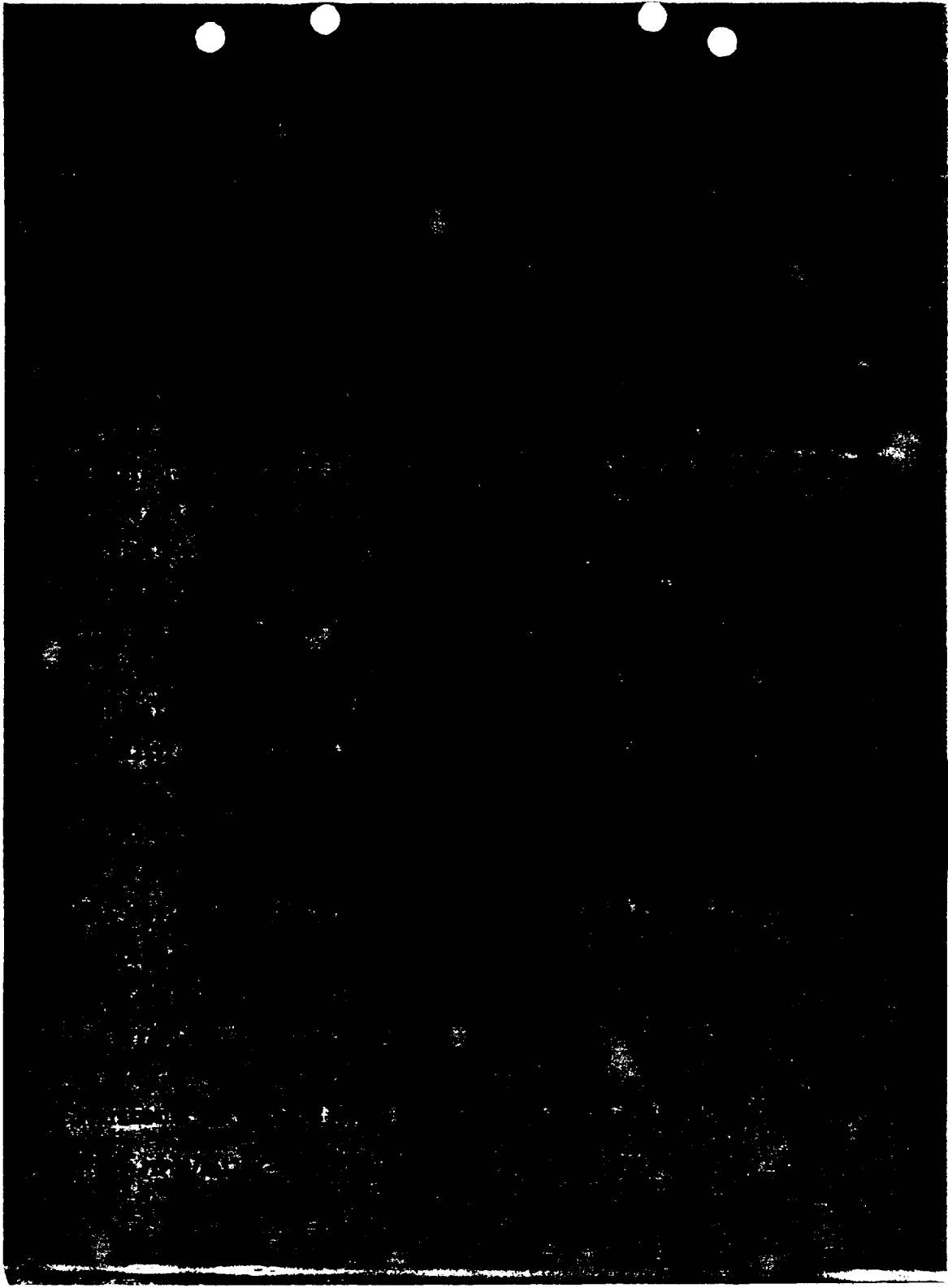
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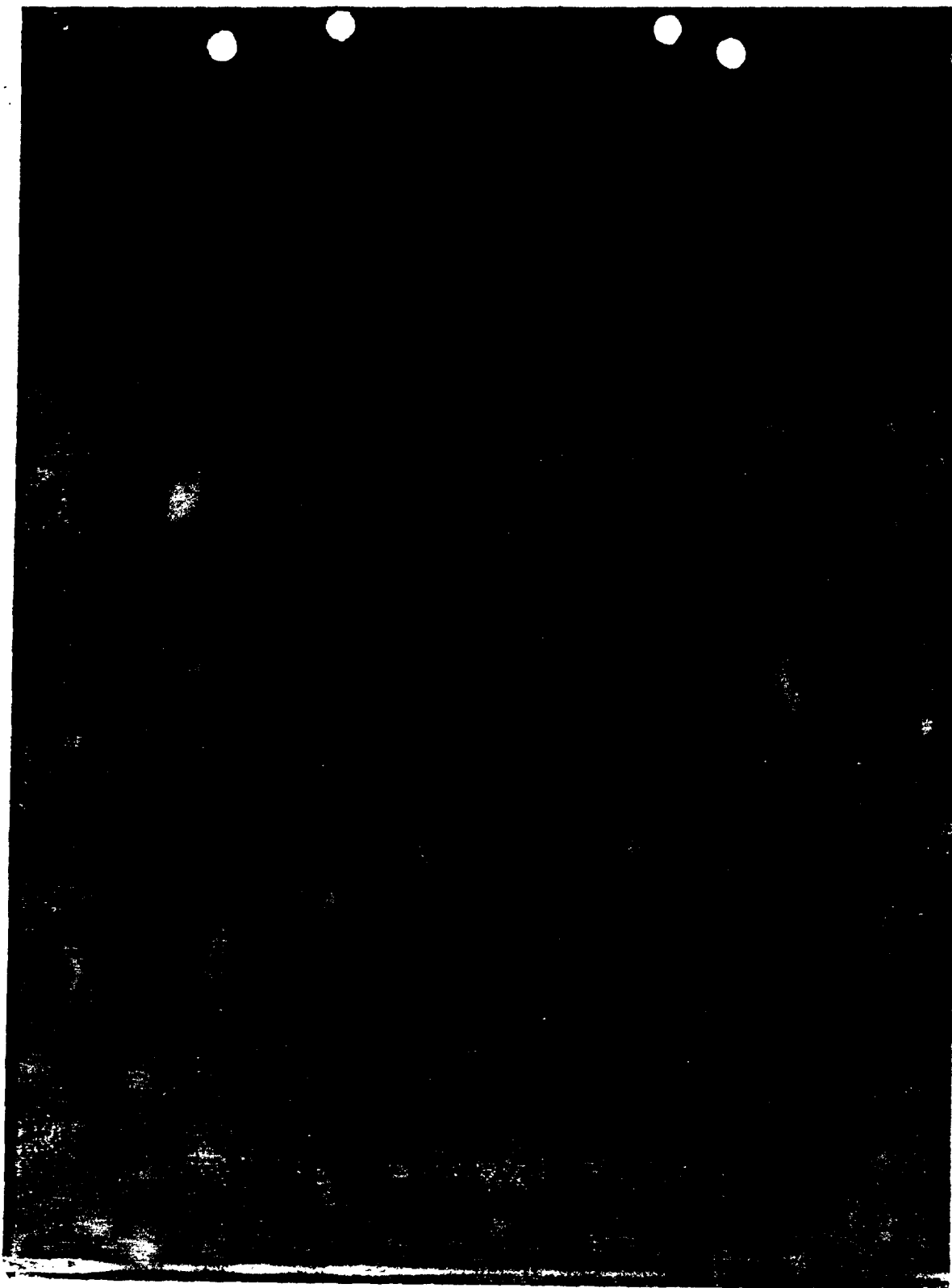
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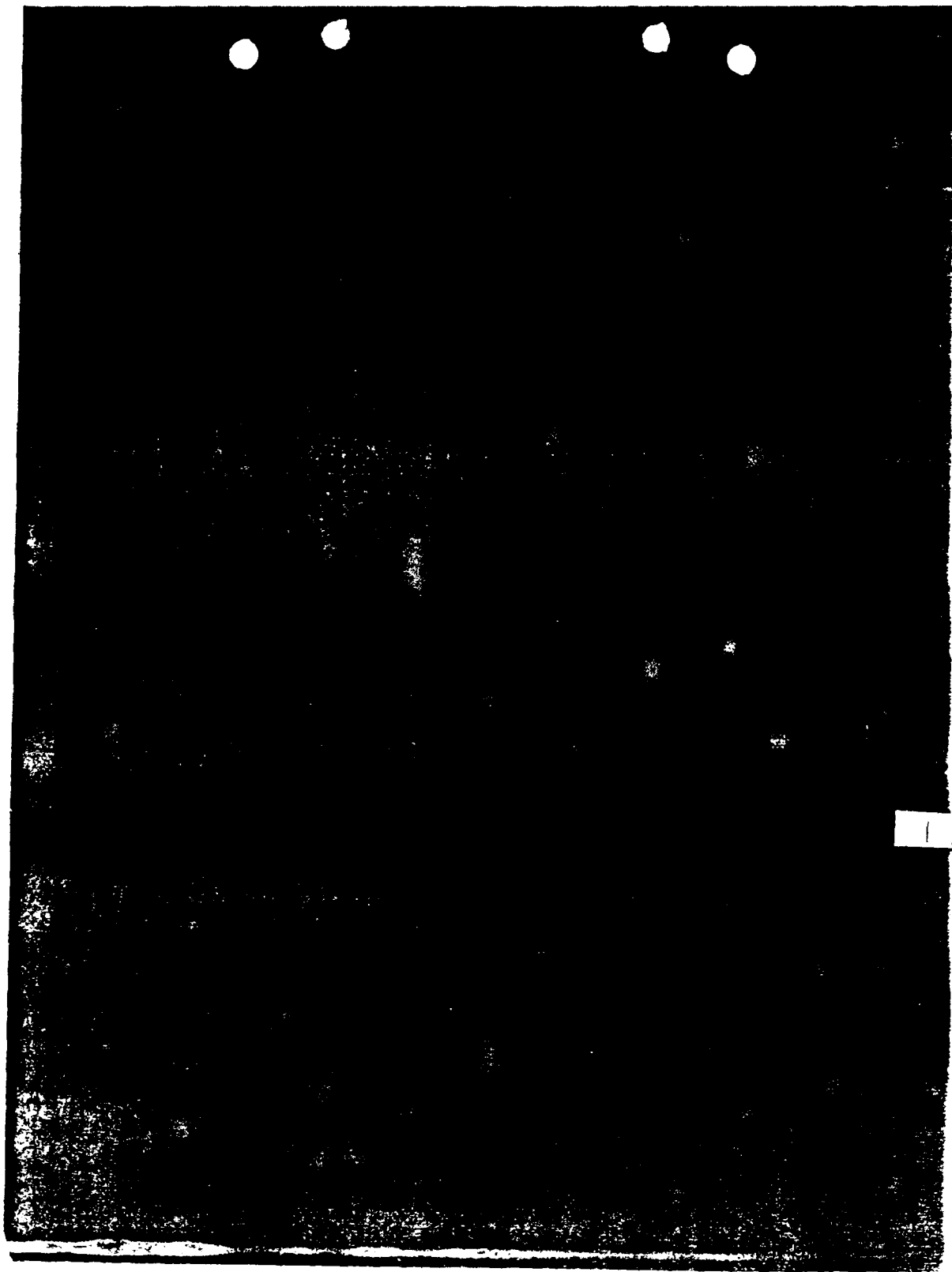
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COPY

ITEM NBR 67.

UNCLASSIFIED/OFFICIAL

FROM LOOL McDONNELL

FOR COL LECHAUSSIE

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

END ITEM NBR 7.

COPY

  
BEST AVAILABLE COPY

SPACEDS FOR WASHINGTON TOMORROW MORNING. INTERVIEWING  
PICK UP AND REVIEW IT ANALYSIS. ALL BEING HANDLED BY DIRECT SEC  
AS FOR INSTRUCTIONS. ITEM NO. CONSULTATION WITH STAFF. HAN CONFIDENTIAL  
MY IMPRESSION OF HIS MEDICAL REPORT. HE STATES NOTHING WAS LEFT  
AND ON BASIS OF THIS THOROUGH COVERAGE, HE WAS CALLED OFF THE LINE  
GEORGE LEROY AND ELMER CROOKETT WHO WERE CHOSEN AS HIS STANDBY COM  
END ITEM 8

BEST AVAILABLE COPY



Department of Public Health  
Rabaul

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 100 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 Röntgen. They immediately contacted their headquarters and took precautions - hoisted 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 ship, which was contaminated.

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

#### BEST AVAILABLE COPY

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, also, 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

R E P O R T

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	5.090	c.p.m.

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or to avoid any mishap.

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

BEST AVAILABLE COPY

COMPARATIVE BLOOD COUNTS OF THE FIRST 10 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

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*Identical with last copy*

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

NAME	W. B. G.	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

PRIVACY ACT MATERIAL REMOVED

-2-

<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 ON JAPANESE COAST GUARD SHIP "SATSUMO" 21.7.58**

<b>NAME</b>	<b>W.B.C.</b>	<b>URINE FOR ALBUMIN</b>
	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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-2-

NAME	B.B.C.	URINE FOR ALBUMIN
	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>H.</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.	R.	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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22nd July - Interview by Sub-Inspector Stewart

- Q. What date exactly did you notice radioactivity?  
A. 14th July 1958.
- Q. How did you notice it?  
A. At a noon check on 14th July 1958
- Q. How much was it?  
A. 35,000 ml
- Q. Did you notify Headquarters Japan?  
A. Yes
- Q. What was their answer regarding the danger?  
A. Ordered to leave that area.
- Q. What did you do?  
A. Left the danger and washed the ship down with a neutral cleaner.
- Q. What is the normal counting for  
Geiger counter? A. 23 - 50  
Scintillograph? A. 24,00 2400
- Q. What is the scintillograph result today?  
A. 2,000
- BEST AVAILABLE COPY**
- Q. Has any member of the crew felt dizziness? Or nausea?  
A. No
- Q. Did any member of the crew vomit? A. No
- Q. Any loss of appetite? A. No
- Q. Are there any skin conditions? A. Yes - sunburn before 14th July and afterwards.
- Q. Any loss of hair? A. No
- Q. Why did the doctor think at the beginning that two members are effected?  
A. The Doctor took two crew members at random and found their blood counts low.
- Weather conditions on the day of 14th July 1958 - scattered showers after which was found radioactivity on the deck.

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 "SATSUNO" 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 25 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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-2-

It was mentioned by the Captain that according to his knowledge 100 milliroentgens per day and 300 milliroentgens 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 sickness, 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. Foldi, 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 23 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 23, 1958.

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

ENCLs.

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LABORATORY REPORT

Received: 23.7.58

Name:

Specimen: <sup>u</sup>rine

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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LABORATORY REPORT

Received: 3.7.82

Name:

Specimen: Urine

Physician: Dr. [illegible]

Ref: [illegible]

Examination: A. K. [illegible]

Specific gravity: 1.018

Colour: Straw

Albumin: Not detected

Sugar: Not detected

MICRO:

RBCs: 6-10 per high power field

WBCs: Nil per high power field

Strawberry 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. 104% (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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COUNTER AND SCALE

NO. (2) COUNTING RATE

SAMPLE NO.

BACKGROUND

DATE

TIME

BY

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

REMARKS

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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 (Arm at heart level)							58. PULSE (Arm at heart level)																
A. SITTING		B. RECU- BENT		C. STAND- ING		D. SITTING		E. AFTER EXERCISE		F. 5 MIN. AFTER		G. AFTER STANDING 5 MIN.											
59. DISTANT VISION		60. REFRACT(DR)		61. NEAR VISION																			
RIGHT 20/		CORR. TO 20/		BY		L.		OK		CORR. TO		BY											
LEFT 20/		CORR. TO 20/		BY		L.		OK		CORR. TO		BY											
62. METEOROPHOBIA (Specify distance)																							
25°		25°		25. N.		L. N.		PRISM DIV.		PRISM CONV.		PC PD											
63. ACCOMMODATION				64. COLOR VISION (Toll test and pencil)				65. DEPTH PERCEPTION (Toll test and cards)				UNCORRECTED											
RIGHT LEFT												CORRECTED											
66. FIELD OF VISION				67. NIGHT VISION (Toll test and cards)				68. RED LENS TEST				69. INTRAOCULAR TENSION											
70. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Toll test and cards)													
RIGHT WV		/10 SV		/10				250 250		500 217		1000 1024		2000 2048		3000 3396		4000 4000		6000 6144		8000 8192	
LEFT WV		/10 SV		/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)

76. 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. D. E.					
79. TYPED OR PRINTED NAME OF PHYSICIAN CARL L. HANSEN, Lt Col, USAF, MC-73		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: 1987 O-432296

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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., city or town, state and Zip)			5. PURPOSE OF EXAMINATION		6. DATE OF EXAMINATION
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

26 Jul 58

CLINICAL EVALUATION		NOTES (Describe every abnormality in detail. Enter pertinent item number before each comment. Continue in item 75 and two additional sheets if necessary.)
NON-ABN.	ABNOR- 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 23 and 24)
<input checked="" type="checkbox"/>		23. EARS—PERFORATION
<input checked="" type="checkbox"/>		24. EYES—GENERAL (Visual acuity and refraction)
<input checked="" type="checkbox"/>		25. OPHTHALMOSCOPIC
<input checked="" type="checkbox"/>		26. PUPILS (Equality and reaction)
<input checked="" type="checkbox"/>		27. OCULAR MOTILITY (Unaided parallel movement)
<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 veins, etc.)
		31. ABDOMEN AND VISCERA (Include hernia)
		32. ANUS AND RECTUM (Hemorrhoids, fissures, proctitis, etc.)
		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 (Abnormalities noted under item 75)
		42. PSYCHIATRIC (Abnormalities noted under item 75)
		43. PELVIC (Females only) (Check how done)
		<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL

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 tooth /—Non-restorable tooth X—Missing tooth XXX—Replaced by dentures (X X X)—Fixed bridge, brackets to include abutments		
U P M T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	

LABORATORY FINDINGS			
45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN			
C. SUGAR			
47. SEROLOGY (Specimen used and result)	48. EEG	49. BLOOD TYPE AND RH FACTOR	50. 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.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER																																	
SYS. 126 DIAS. 84		SYS. 84 DIAS. 54		SYS. 84 DIAS. 54		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER																																	
59. DISTANT VISION				60. REFRACTION				61. NEAR VISION																																			
RIGHT 20/		CORR. TO 20/		BY		S.		OK		CORR. TO																																	
LEFT 20/		CORR. TO 20/		BY		S.		OK		CORR. TO																																	
62. METEOPHOBIA (Specify distance)																																											
ES°		EX°		E. H.		L. H.		PRISM DIV.		PRISM CONV.																																	
63. ACCOMMODATION		64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)				UNCORRECTED																																	
RIGHT LEFT										CORRECTED																																	
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 PSYCHOMOTRIC (Test used and score)																																	
RIGHT HV /10 HV /15		<table border="1"> <tr> <td>250</td> <td>500</td> <td>1000</td> <td>2000</td> <td>4000</td> <td>8000</td> <td>16000</td> <td>32000</td> </tr> <tr> <td>250</td> <td>512</td> <td>1024</td> <td>2048</td> <td>4096</td> <td>8192</td> <td>16384</td> <td>32768</td> </tr> <tr> <td>RIGHT</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> </tr> </table>								250	500	1000	2000	4000	8000	16000	32000	250	512	1024	2048	4096	8192	16384	32768	RIGHT								LEFT									
250	500	1000	2000	4000	8000	16000	32000																																				
250	512	1024	2048	4096	8192	16384	32768																																				
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 diagnosis with item numbers)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)					76. A. PHYSICAL PROFILE																
77. EXAMINES (Check) A. <input type="checkbox"/> IS QUALIFIED FOR B. <input type="checkbox"/> IS NOT QUALIFIED FOR					<table border="1"> <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											
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER					B. PHYSICAL CATEGORY																
					<table border="1"> <tr> <td>A</td> <td>B</td> <td>C</td> <td>E</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>					A	B	C	E								
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 1																

U. S. GOVERNMENT PRINTING OFFICE: 1957 O-444400

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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, 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 (See 8 and 9; include laboratory results under item 71)	
<input checked="" type="checkbox"/>	23. DRUMS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction; include 76, 80 and 81)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Unaided parallel and convergent)	
<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 veins, 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, feet; Strength, range of motion)	
	38. SPINE, OTHER MUSCULOSKELETAL	
	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
	40. SKIN LYMPHATICS	
	41. NEUROLOGIC (Examination only under item 70)	
	42. PSYCHIATRIC (Examination only for remaining items)	
	43. PELVIC (Females only) (Check here 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.)

O—Restorable teeth  
/—Nonrestorable teeth

X—Missing teeth  
XXX—Replaced by dentures

(S X F)—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
O	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	F
U																	T

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

LABORATORY FINDINGS

45. URINALYSIS A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN	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 (3 min.)		D. AFTER EXERCISE		E. 1 MIN. AFTER		F. AFTER STANDING 1 MIN.																																					
59. DISTANT VISION		60. REFRACTION		61. NEAR VISION																																											
RIGHT 20/		CORR TO 20/		BY		B.		OR		CORR TO																																					
LEFT 20/		CORR TO 20/		BY		B.		OR		CORR TO																																					
62. METEOROPHORIA (Specify distance)																																															
63. ACCOMMODATION		64. COLOR VISION (Test used and result)		65. DEPTH PERCEPTION (Test used and score)		66. FIELD OF VISION		67. NIGHT VISION (Test used and score)		68. RED LENS TEST																																					
RIGHT		LEFT		UNCORRECTED		CORRECTED		69. INTRAOCULAR TENSION																																							
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Table used and score)																																							
RIGHT WV		/15 BV		/15		<table border="1"> <tr> <td>250</td> <td>500</td> <td>1000</td> <td>2000</td> <td>4000</td> <td>8000</td> <td>16000</td> <td>32000</td> </tr> <tr> <td>dB</td> <td>dB</td> <td>dB</td> <td>dB</td> <td>dB</td> <td>dB</td> <td>dB</td> <td>dB</td> </tr> <tr> <td>RIGHT</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> </tr> </table>						250	500	1000	2000	4000	8000	16000	32000	dB	dB	dB	dB	dB	dB	dB	dB	RIGHT								LEFT											
250	500	1000	2000	4000	8000	16000	32000																																								
dB	dB	dB	dB	dB	dB	dB	dB																																								
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																	
					<table border="1"> <tr> <td>P</td> <td>U</td> <td>L</td> <td>M</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	M	E	S						
P	U	L	M	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					<table border="1"> <tr> <td>A</td> <td>B</td> <td>C</td> <td>E</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>						A	B	C	E								
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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Standard Form 88  
(Rev. June 1960)

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME			2. GRADE AND COMPONENT OR POSITION		3. IDENTIFICATION NO.	
4. HOME ADDRESS (If known, —all 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		
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	ABNO.
18.	HEAD, FACE, NECK, AND SCALP	
19.	NOSE	
20.	EARS	
21.	MOUTH AND THROAT	
22.	EYES—GENERAL (Examine general appearance under items 24 and 25)	
23.	DRUGS (Prescription)	
24.	EYES—GENERAL (Examine general appearance under items 24, 25 and 27)	
25.	OPHTHALMOSCOPIC	
26.	PUPILS (Equality and reaction)	
27.	OCULAR MOTILITY (Examine general appearance under items 24, 25 and 27)	
28.	LUNGS AND CHEST (Include breasts)	
29.	HEART (Thrust, size, rhythm, sounds)	
30.	VASCULAR SYSTEM (Varicose veins, etc.)	
31.	ABDOMEN AND VISCERA (Include hernia)	
32.	ANUS AND RECTUM (Examine general appearance under items 31, 32 and 33)	
33.	ENDOCRINE SYSTEM	
34.	G-U SYSTEM	
35.	UPPER EXTREMITIES (Strength, range of motion)	
36.	FEET	
37.	LOWER EXTREMITIES (Examine feet)	
38.	SPINE, OTHER MUSCULOSKELETAL	
39.	IDENTIFYING BODY MARKS, SCARS, TATTOOS	
40.	SKIN LYMPHATICS	
41.	NEUROLOGIC (Examine general appearance under items 31, 32 and 33)	
42.	PSYCHIATRIC (Examine general appearance under items 31, 32 and 33)	
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 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 /—Nonrestorable teeth X—Missing teeth YYY—Replaced by dentures (B X E)—Fixed bridge, brackets to include abutments		
R	1 2 3 4 5 6 7 8	
I	9 10 11 12 13 14 15 16	
C	17 18 19 20 21 22 23 24	
H	25 26 27 28 29 30 31 32	

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 (Arm at heart level)						88. PULSE (4th or 5th heart lead)					
A. SITTING		B. DECUB- SUS		C. STANDING (8 min.)		A. SITTING		B. AFTER EXERCISE		C. 5 MIN. AFTER	
D. RECURRENT		E. AFTER STANDING 5 MIN.									
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. METEOROPHOBIA (Specify distances)											
20°		30°		E. N.		L. N.		PRISM DIV.		PRISM CONV.	
										PC	
										PD	
93. ACCOMMODATION				94. COLOR VISION (Test used and result)				95. DEPTH PERCEPTION (Test used and result)		UNCORRECTED	
RIGHT LEFT										CORRECTED	
96. FIELD OF VISION				97. NIGHT VISION (Test used and result)				98. RED LENS TEST		99. INTRACULAR TENSION	
70. HEARING				71. AUDIOMETER							
				72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and result)							
RIGHT HV /10 BV /10											
LEFT HV /10 BV /10											

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)					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 <b>CARL. L. HANSEN, Lt Col, USAF, MC-73</b>					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	

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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 PD, 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.	(Check each item in appropriate column; enter "NE" if not evaluated)	ABNO.
18.	HEAD, FACE, NECK, AND SCALP	
19.	NOSE	
20.	SINUSES	
21.	MOUTH AND THROAT	
22.	EARS—GENERAL (Use 8 and 9 only) (Audiometry under items 26 and 27)	
23.	EARS (Perforation)	
24.	EYES—GENERAL (Visual acuity and refraction under items 28, 29 and 31)	
25.	OPHTHALMOLOGIC	
26.	PUPILS (Equality and reaction)	
27.	OCULAR MOTILITY (Assess parallel movement, conjugate, synchronous)	
28.	LUNGS AND CHEST (Include breasts)	
29.	HEART (Thrust, size, rhythm, sounds)	
30.	VASCULAR SYSTEM (Varicose veins, 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 (Strength, range of motion)	
38.	SPINE, OTHER MUSCULOSKELETAL	
39.	IDENTIFYING BODY MARKS, SCARS, TATTOOS	
40.	SKIN LYMPHATICS	
41.	NEUROLOGIC (Reflexes, etc. under item 39)	
42.	PSYCHIATRIC (Specify any personality disorders)	
43.	PELVIC (Females only) (Check box below)	
<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 S)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth      YYY—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. EEG	
C. SUGAR		49. BLOOD TYPE AND RH FACTOR	
47. SEROLOGY (Specify test used and result)		50. OTHER TESTS	

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PRIVACY ACT MATERIAL REMOVED

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., city or town, state 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. RATINGS OR SPECIALTY			TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

CLINICAL EVALUATION		
NO.	(Check each item in appropriate column; enter "NE" if not evaluated)	ABNO.
18.	HEAD, FACE, NECK, AND SCALP	
19.	NOSE	
20.	SINUSES	
21.	MOUTH AND THROAT	
22.	EARS—GENERAL (Check, if not separately indicated)	
23.	DRUMS (Perforation)	
24.	EYES—GENERAL (Check, if not separately indicated)	
25.	OPHTHALMOSCOPIC	
26.	PUPILS (Equality and reaction)	
27.	OCULAR MOTILITY (Unassisted; peripheral vision; accommodation)	
28.	LUNGS AND CHEST (Include bronchi)	
29.	HEART (Thrust, size, rhythm, sounds)	
30.	VASCULAR SYSTEM (Varicose veins, etc.)	
31.	ABDOMEN AND VISCERA (Include hernia)	
32.	ANUS AND RECTUM (Hemorrhoids, fissures, fistulae, if indicated)	
33.	ENDOCRINE SYSTEM	
34.	SKIN 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.	HEIN LYMPHATICS	
41.	NEUROLOGIC (Qualitative tests under item 42)	
42.	PSYCHIATRIC (Qualitative tests under item 43)	
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      (X X X)—Part of bridge, brackets to include abutments /—Nonrestorable teeth      XXX—Replaced by dentures																																																																																												
<table border="1"> <tr> <td>R</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>L</td> </tr> <tr> <td>I</td><td>22</td><td>21</td><td>20</td><td>19</td><td>18</td><td>17</td><td>16</td><td>15</td><td>14</td><td>13</td><td>12</td><td>11</td><td>10</td><td>9</td><td>8</td><td>7</td><td>E</td> </tr> <tr> <td>O</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>H</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>T</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>			R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L	I	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	E	O																		H																		T																	
R	1		2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L																																																																										
I	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	E																																																																											
O																																																																																												
H																																																																																												
T																																																																																												

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY		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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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

CLINICAL EVALUATION		ABNO-
NOR-	(Check each item in appropriate column; enter "NE" if not evaluated)	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 (Check if not separate LA history; specify under items 23 and 24)	
<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 (Assessing parallel movement, convergence)	
<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 (Hemorrhoids, fissures; 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 (Gross foot; 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 (Qualitative 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

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 XX—Replaced by denture	
(S X F)—Fixed bridge, brackets to include abutments		
R I O M T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1	L 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. 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 (Arm of heart level)						88. PULSE (Arm of heart level)					
A. SITTING		B. STANDING		C. AFTER EXERCISE		D. AFTER EXERCISE		E. 2 MIN. AFTER		F. AFTER STANDING 3 MIN.	
89. DIETARY VISION		90. REFRACTION		91. NEAR VISION		92. HETEROPHORIA (Specify distance)		93. ACCOMMODATION		94. COLOR VISION (Test used and result)	
RIGHT 20/		CORR. TO 20/		BY		E.		95. DEPTH PERCEPTION (Test used and result)		UNCORRECTED	
LEFT 20/		CORR. TO 20/		BY		E.		96. RED LENS TEST		CORRECTED	
97. FIELD OF VISION		98. RIGHT VISION (Test used and result)		99. LEFT VISION (Test used and result)		100. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and result)		101. HEARING		102. AUDIOMETER	
RIGHT HV		/10 HV		/10		103. 250		104. 500		105. 1000	
LEFT HV		/10 HV		/10		106. 2000		107. 4000		108. 8000	
						109. 16000		110. 32000		111. 64000	
						112. 128000		113. 256000		114. 512000	
						115. 1024		116. 2048		117. 4096	
						118. 8192		119. 16384		120. 32768	
						121. 65536		122. 131072		123. 262144	
						124. 524288		125. 1048576		126. 2097152	
						127. 4194304		128. 8388608		129. 16777216	
						130. 33555456		131. 67110912		132. 134221824	
						133. 268177280		134. 536354560		135. 1072709120	
						136. 2145416960		137. 4290833920		138. 8581667840	
						139. 6767500800		140. 13535001600		141. 27070003200	
						142. 54140003200		143. 108280006400		144. 216560012800	
						145. 172440006400		146. 344880012800		147. 689760025600	
						148. 137952006400		149. 275904012800		150. 551808025600	
						151. 110361606400		152. 220723212800		153. 441446425600	
						154. 882889606400		155. 1765779212800		156. 3531558425600	
						157. 706311606400		158. 1412623212800		159. 2825246425600	
						160. 565049606400		161. 1130099212800		162. 2260198425600	
						163. 452039606400		164. 904079212800		165. 1808158425600	
						166. 361631606400		167. 723263212800		168. 1446526425600	
						169. 290105606400		170. 580211212800		171. 1160422425600	
						172. 232084606400		173. 464169212800		174. 928338425600	
						175. 185667606400		176. 371335212800		177. 742670425600	
						178. 148534606400		179. 297069212800		180. 594138425600	
						181. 118827606400		182. 237655212800		183. 475310425600	
						184. 950620606400		185. 1901241212800		186. 3802482425600	
						187. 760500606400		188. 1521001212800		189. 3042002425600	
						190. 608400606400		191. 1216801212800		192. 2433602425600	
						193. 486720606400		194. 9734401212800		195. 1946882425600	
						196. 389376606400		197. 7787521212800		198. 155750425600	
						199. 311500606400		199. 6230001212800		199. 124600025600	
						200. 249200606400		200. 4984001212800		200. 99680025600	
						200. 199360606400		200. 3987201212800		200. 79744025600	
						200. 159520606400		200. 3190401212800		200. 63808025600	
						200. 127616606400		200. 2552321212800		200. 51046425600	
						200. 102100606400		200. 2042001212800		200. 40840025600	
						200. 816800606400		200. 1633601212800		200. 32672025600	
						200. 653440606400		200. 1306881212800		200. 26137625600	
						200. 522752606400		200. 1045504212800		200. 209100825600	
						200. 418200606400		200. 8364001212800		200. 167280025600	
						200. 334560606400		200. 6691201212800		200. 133824025600	
						200. 267648606400		200. 5352961212800		200. 107059225600	
						200. 2141184606400		200. 4282368212800		200. 856473625600	
						200. 17129472606400		200. 34258944212800		200. 6851788825600	
						200. 137035776606400		200. 274071552212800		200. 54814310425600	
						200. 107628622606400		200. 2152572452212800		200. 430514490425600	
						200. 8610290622606400		200. 172205812452212800		200. 34441162490425600	
						200. 68082325022606400		200. 1361646500452212800		200. 272329300090425600	
						200. 54465860022606400		200. 108931720090425600		200. 217863440180825600	
						200. 43572688022606400		200. 871453760360825600		200. 1742907520721625600	
						200. 34858150422606400		200. 697163008721625600		200. 1394326017443225600	
						200. 28286520322606400		200. 565730406443225600		200. 1131460812886425600	
						200. 22629216222606400		200. 452584324886425600		200. 905168649772825600	
						200. 18103372922606400		200. 362067459772825600		200. 724134919545625600	
						200. 14482698322606400		200. 289653966545625600		200. 579307933091225600	
						200. 11586158622606400		200. 231723172545625600		200. 463446345091225600	
						200. 92690069222606400		200. 1853801384886425600		200. 3707602769772825600	
						200. 74152055322606400		200. 1483041106772825600		200. 2966082213545625600	
						200. 59321644222606400		200. 1186432885545625600		200. 2372865771091225600	
						200. 47457315322606400		200. 9491463061091225600		200. 189829261221625600	
						200. 38765852222606400		200. 77531704221625600		200. 155063408443225600	
						200. 31012681222606400		200. 62025362443225600		200. 124050724886425600	
						200. 25010145222606400		200. 50020290486425600		200. 100040580972825600	
						200. 20008112222606400		200. 40016224972825600		200. 80032449945625600	
						200. 16006489222606400		200. 32012978945625600		200. 64025957891225600	
						200. 12805191222606400		200. 25610387891225600		200. 51220775782425600	
						200. 10244152222606400		200. 20488304782425600		200. 40976609564825600	
						200. 81953217222606400		200. 16390643564825600		200. 32781287129625600	
						200. 65562573222606400		200. 13112514129625600		200. 26225028259225600	
						200. 52450058222606400		200. 10490011259225600		200. 20980022518425600	
						200. 41960046222606400		200. 83920092518425600		200. 16784018503625600	
						200. 33568037222606400		200. 6713607503625600		200. 13427215007225600	
						200. 26854429222606400		200. 53708850072225600		200. 10741770014425600	
						200. 21483543222606400		200. 4296708614425600		200. 8593417228825600	
						200. 17186834222606400		200. 3437367228825600		200. 6874734457625600	
						200. 13749467222606400		200. 2749893457625600		200. 5499786915225600	
						200. 10999573222606400		200. 21999146152225600		200. 4399829230425600	
						200. 87996585222606400		200. 1759931230425600		200. 3519862460825600	
						200. 70397268222606400		200. 1407945260825600		200. 2815890521625600	
						200. 56317813222606400		200. 1126350521625600		200. 2252701043225600	
						200. 45054250222606400		200. 90108500432225600		200. 18021700086425600	
						200. 36043400222606400		200. 7208680086425600		200. 14417360172825600	
						200. 28834720222606400		200. 5766944172825600		200. 11533888345625600	
						200. 23067776222606400		200. 46135552345625600		200. 92271104691225600	
						200. 18454220822606400		200. 36908441691225600		200. 73816883382425600	
						200. 14763376622606400		200. 29526753382425600		200. 59053506764825600	
						200. 118107012822606400		200. 23621402564825600		200. 47242805129625600	
						200. 94485610222606400		200. 18897122129625600		200. 37794244259225600	
						200. 75588488222606400		200. 15195697259225600		200. 30391394518425600	
						200. 60470790222606400		200. 12294158518425600		200. 24588317036825600	
						200. 48376632222606400		200. 9675326436825600		200. 19350652873625600	
						200. 38701305222606400		200. 7740261273625600		200. 15480522547225600	
						200. 30961044222606400		200. 61922085472225600		200. 12384417094425600	
						200. 24768835222606400		200. 4953767094425600		200. 9907534188825600	
						200. 19815068222606400		200. 3963013688825600		200. 7926027377625600	
						200. 15852054222606400		200. 3170410877625600		200. 6340821755225600	
						200. 12681643222606400		200. 25363207552225600		200. 5072641510425600	
						200. 10145314222606400		200. 2029061510425600		200. 4058123020825600	
						200. 81162512222606400		200. 162325020208256			

## 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, 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		
NO.	DESCRIPTION	ADJUD.
18.	HEAD, FACE, NECK, AND SCALP	
19.	NOSE	
20.	EARS	
21.	MOUTH AND THROAT	
22.	EYES—GENERAL (Check each item in appropriate column; enter "NG" if not evaluated)	
23.	DRUGS (Prescription)	
24.	EYES—GENERAL (Check each item in appropriate column; enter "NG" if not evaluated)	
25.	OPHTHALMOSCOPIC	
26.	PUPILS (Equality and reaction)	
27.	OCULAR MOTILITY (Examine each eye separately)	
28.	LUNGS AND CHEST (Include breaths)	
29.	HEART (Thrust, size, rhythm, sounds)	
30.	VASCULAR SYSTEM (Arteries, etc.)	
31.	ABDOMEN AND VISCERA (Include hernia)	
32.	ARMS AND RECTUM (Examine both arms; include rectum)	
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 (Examine both arms under item 38)	
42.	PSYCHIATRIC (Examine both arms under item 38)	
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

44. DENTAL (Place appropriate symbols above or below number of upper and lower teeth, respectively.)		45. CHEST X-RAY (Place, date, film number and result)	
O—Restorable tooth /—Nonrestorable tooth X—Missing tooth XXX—Replaced by denture (If X's)—Fixed bridge, brackets to include abutments		SYNOPSIS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
R	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 L		
I	22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1		
G			
H			
T			

LABORATORY FINDINGS			
46. URINALYSIS A. SPECIFIC GRAVITY		47. 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											
51. HEIGHT		52. WEIGHT		53. COLOR HAIR		54. COLOR EYES		55. BUILD: <input type="checkbox"/> SLIMBER <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 SYS. 122 DIA. 90		B. RECUMBENT SYS. DIA.		C. STANDING (5 min.) SYS. DIA.		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER	
59. DISTANT VISION		60. REFRACTION		61. NEAR VISION							
RIGHT 20/		CORR. TO 20/		BY		S.		DE		CORR. TO	
LEFT 20/		CORR. TO 20/		BY		S.		DE		CORR. TO	
62. HETEROPHORIA (Specify distance)											
ES°		EX°		R. N.		L. N.		PRISM DIV.		PRISM CORR. CT	
63. ACCOMMODATION		64. COLOR VISION (Test used and result)		65. DEPTH PERCEPTION (Test used and result)		UNCORRECTED					
RIGHT		LEFT				CORRECTED					
66. FIELD OF VISION		67. NIGHT VISION (Test used and result)		68. RED LENS TEST		69. INTRAOCULAR TENSION					
70. HEARING		71. AUBIONETER		72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and result)							
RIGHT HV		/10 HV		/10							
LEFT HV		/10 HV		/10							

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

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

(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					
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, 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.

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		ABNORMAL
NO.	DESCRIPTION	
X	18. HEAD, FACE, NECK, AND SCALP	
X	19. NOSE	
X	20. SINUSES	
X	21. MOUTH AND THROAT	
X	22. EARS—GENERAL (Examine under items 19 and 21)	
X	23. DRUMS (Perforation)	
X	24. EYES—GENERAL (Examine under items 25, 26 and 27)	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Examine under items 25 and 26)	
X	28. LUNGS AND CHEST (Include breaths)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Varicose, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Examine under items 31 and 32)	
	33. ENDOCRINE 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 (Examine under items 39 and 40)	
	42. PSYCHIATRIC (Examine under items 39 and 40)	
	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 /—Nonrestorable teeth	X—Missing teeth YYY—Replaced by dentures (S X B)—Fixed bridge, brackets to include abutments	
R I G H T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	

## LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN		47. BLOOD TYPE AND RH FACTOR	
C. SUGAR		48. OTHER TESTS	
49. SEROLOGIC (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 (AFTER 5 MIN. REST)						88. PULSE (AFTER 5 MIN. REST)					
A. SITTING		B. STANDING		C. AFTER EXERCISE		D. 1 MIN. AFTER		E. 5 MIN. AFTER		F. AFTER STANDING 5 MIN.	
89. DISTANT VISION		90. REFRACTION		91. NEAR VISION		92. HETEROPHORIA (Specify distance)		93. ACCOMMODATION		94. COLOR VISION (Fast test and result)	
RIGHT 20/		CORR. TO 20/		BY		D.		CORR. TO		BY	
LEFT 20/		CORR. TO 20/		BY		D.		CORR. TO		BY	
95. FIELD OF VISION		96. RIGHT VISION (Fast test and score)		97. LEFT VISION (Fast test and score)		98. RED LENS TEST		99. INTRAOCULAR TENSION		100. PSYCHOLOGICAL AND PSYCHOMOTOR (Fast test and score)	
RIGHT HV		/15 HV		/15		101. AUDIOMETER		102. PSYCHOLOGICAL AND PSYCHOMOTOR (Fast test and score)		103. PSYCHOLOGICAL AND PSYCHOMOTOR (Fast test and score)	
LEFT HV		/15 HV		/15		104. PSYCHOLOGICAL AND PSYCHOMOTOR (Fast test and score)		105. PSYCHOLOGICAL AND PSYCHOMOTOR (Fast test and score)		106. PSYCHOLOGICAL AND PSYCHOMOTOR (Fast test and score)	

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

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. <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 E. HANSEN, Lt Col, USAF, MC, -PS									
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									

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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 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		ABNORMAL
NOR- MAL	(Check each item in appropriate column; enter "NE" if not evaluated.)	NAL
<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 and 9; specify left and right; specify under items 10 and 11)	
<input checked="" type="checkbox"/>	23. DRUMS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Specify acuity and refraction; specify under items 12, 13 and 14)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Assess parallel motion; specify under items 15 and 16)	
<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, fissures)	
<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 (Specify under items 17 and 18)	
<input checked="" type="checkbox"/>	42. PSYCHIATRIC (Specify any personality disturbance)	
<input checked="" type="checkbox"/>	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

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 (If X or XXX—Fixed bridge, brackets to include abutments)		
R I G H T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1	
L 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. 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"/> SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBSE		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 (8 min.)		D. SITTING		E. AFTER EXERCISE		F. 3 MIN. AFTER	
SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.	
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION			
RIGHT 20/		CORR. TO 20/		BY		S.		OR		CORR. TO	
LEFT 20/		CORR. TO 20/		BY		S.		OR		CORR. TO	
92. HETEROPHORIA (Dipn/y distance)											
ES°		EX°		E. H.		L. H.		PRISM DIV.		PRISM CONV.	
93. ACCOMMODATION		94. COLOR VISION (Fad test and result)		95. DEPTH PERCEPTION (Fad test and score)		96. UNCORRECTED		97. CORRECTED		98. INTRAOCULAR TENSION	
RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT	
99. FIELD OF VISION				100. RIGHT VISION (Fad test and score)				101. RED LENS TEST			
102. HEARING				103. AUDIOMETER				104. PSYCHOLOGICAL AND PSYCHOMOTOR (Fad test and score)			
RIGHT WV		/16 BV		/16		250		500		1000	
LEFT WV		/16 BV		/16		250		500		1000	
RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT	
105. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY											

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

(Use additional sheets if necessary)

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

107. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)					108. A. PHYSICAL PROFILE				
					P U L H E S				
109. EXAMINEE (Check)					B. PHYSICAL CATEGORY				
A. <input type="checkbox"/> IS QUALIFIED FOR					A B C E				
B. <input type="checkbox"/> IS NOT QUALIFIED FOR									
110. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER									
111. TYPED OR PRINTED NAME OF PHYSICIAN					SIGNATURE				
CARL L. HANSEN, Lt Col, USAF, MC -PS									
112. TYPED OR PRINTED NAME OF PHYSICIAN					SIGNATURE				
113. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)					SIGNATURE				
114. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY					SIGNATURE				
					NUMBER OF ATTACHED SHEETS				

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## REPORT OF PHYSICAL 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 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	
NOR- MAL	(Check each item in appropriate col- umn; enter "NE" if not evaluated)
<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 and 10 and 11)
<input checked="" type="checkbox"/>	23. DRUGS (Prescription)
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction)
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC
<input checked="" type="checkbox"/>	26. PUPILS (Reactivity and reaction)
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Unassisted; peripheral vision; accommodation)
<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.)
	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 (Mental status tests under item 18)
	42. PSYCHIATRIC (Mood, personality, behavior)
	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 XX—Replaced by dentures (d X f)—Fixed bridge, brackets to include abutments																			
R I G H T	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L E F T		
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17			

## 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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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 (Ave of heart level)						88. PULSE (Ave of heart level)					
A. SITTING		B. AFTER EXERCISE		C. 3 MIN. AFTER		D. RECURRENT		E. AFTER STANDING 3 MIN.			
SYS. 118 DIAS. 70		SYS. 118 DIAS. 70		SYS. 118 DIAS. 70		SYS. 118 DIAS. 70		SYS. 118 DIAS. 70			
89. DISTANT VISION				90. REFRACTION				91. NEAR VISION			
RIGHT 20/ LEFT 20/		CORR. TO 20/ CORR. TO 20/		BY BY		S. S.		CX. CX.		CORR. TO CORR. TO	
92. METROPHORIA (Specify distance)											
ES*		EX*		E. 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 result)			
RIGHT LEFT								UNCORRECTED CORRECTED			
96. FIELD OF VISION				97. NIGHT VISION (Test used and result)				98. RED LENS TEST			
								99. INTRAOCULAR TENSION			
100. HEARING				101. AUDIOMETER				102. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and result)			
RIGHT HV /10 BV /10				250 500 1000 2000 4000 8000 16000 32000							
LEFT HV /10 BV /10				RIGHT LEFT							

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

In - 39PD Raditations: 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 L. HANSEN, 1st Col, USAF, MC, -F3

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

SIGNATURE

SIGNATURE

SIGNATURE

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, 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			
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 31 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 (Include otitis media, etc.)		
<input checked="" type="checkbox"/>	23. EARS—INTERNAL (Perforation)		
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Include conjunctivitis, etc.)		
<input checked="" type="checkbox"/>	25. EYES—OPHTHALMOSCOPIC		
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)		
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Unaided, parallel motion, etc.)		
<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 (Varicose veins, etc.)		
<input checked="" type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)		
<input checked="" type="checkbox"/>	32. ANUS AND RECTUM (Include hemorrhoids, etc.)		
<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 73)		
<input checked="" type="checkbox"/>	42. PSYCHIATRIC (Specify any personality disorders)		
<input checked="" type="checkbox"/>	43. PELVIC (Female only) (Check how done)		
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL		

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      (O 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	22	21	20	19	18	17	16	15	24	23	22	21	20	19	18	17	F		
G																	T		
M																			
T																			

LABORATORY FINDINGS			
45. URINALYSIS: A. SPECIFIC GRAVITY		46. CHEST X-RAY (Place, date, film number and result)	
B. ALBUMIN		C. 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

91. HEIGHT		92. WEIGHT		93. COLOR HAIR		94. COLOR EYES		95. BUILD: <input type="checkbox"/> SLIM <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE		96. TEMPERATURE																																									
97. BLOOD PRESSURE (After at least 5 min.)						98. PULSE (After at least 5 min.)																																													
A. SITTING		B. RECUMBENT		C. STANDING (5 min.)		A. SITTING		B. AFTER EXERCISE		C. 5 MIN. AFTER																																									
SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.		SYS. DIA.																																									
99. DISTANT VISION				100. REFRACTION				101. NEAR VISION																																											
RIGHT 20/		CORR. TO 20/		BY		S.		CX		CORR. TO																																									
LEFT 20/		CORR. TO 20/		BY		S.		CX		CORR. TO																																									
102. METEOROPHOBIA (Specify distance)																																																			
ES		EX		S. N.		L. N.		PRISM DIV.		PRISM CORV. CT																																									
103. ACCOMMODATION				104. COLOR VISION (Test used and result)				105. DEPTH PERCEPTION (Test used and result)																																											
RIGHT LEFT								UNCORRECTED																																											
								CORRECTED																																											
106. FIELD OF VISION				107. NIGHT VISION (Test used and result)				108. RED LENS TEST																																											
								109. INTRAOCULAR TENSION																																											
110. HEARING				111. AUDIOMETER																																															
				112. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and result)																																															
RIGHT WY /15 BY /15				<table border="1"> <tr> <td>250</td> <td>500</td> <td>1000</td> <td>1500</td> <td>2000</td> <td>3000</td> <td>4000</td> <td>5000</td> <td>6000</td> <td>7000</td> </tr> <tr> <td>250</td> <td>512</td> <td>1024</td> <td>1536</td> <td>2048</td> <td>3072</td> <td>4096</td> <td>5120</td> <td>6144</td> <td>7168</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	500	1000	1500	2000	3000	4000	5000	6000	7000	250	512	1024	1536	2048	3072	4096	5120	6144	7168	RIGHT										LEFT									
250	500	1000	1500	2000	3000	4000	5000	6000	7000																																										
250	512	1024	1536	2048	3072	4096	5120	6144	7168																																										
RIGHT																																																			
LEFT																																																			

113. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

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

(Use additional sheets if necessary)

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

115. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

116. EXAMINEE (Check)

A. ☐ IS QUALIFIED FOR  
B. ☐ IS NOT QUALIFIED FOR

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

118. TYPED OR PRINTED NAME OF PHYSICIAN

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

119. TYPED OR PRINTED NAME OF PHYSICIAN

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

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

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

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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 (A/P/M of heart level)						88. PULSE (A/P/M of heart level)					
A. SITTING		B. STANDING		C. AFTER EXERCISE		D. 2 MIN. AFTER		E. RECURRENT		F. AFTER STANDING 2 MIN.	
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. HETEROPHORIA (Dipn/y distance)											
ES°		EX°		E. N.		L. N.		PRISM DIV.		PRISM CORV.	
93. ACCOMMODATION		94. COLOR VISION (Test used and result)		95. DEPTH PERCEPTION (Test used and score)		UNCORRECTED					
RIGHT		LEFT		96. FIELD OF VISION		97. NIGHT VISION (Test used and score)		98. RED LENS TEST		99. INTRAOCULAR TENSION	
100. HEARING		101. AUDIOMETER		102. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)							
RIGHT HV		/10 HV		/10		1000		1000		1000	
LEFT HV		/10 HV		/10		1000		1000		1000	

72. NOTES (Combined) AND SIGNIFICANT OR INTERVAL HISTORY

in 39-PD radiation: 4-5 to 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 E. HANSEN, Lt Col, USAF, MC, P-3

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

SIGNATURE

SIGNATURE

SIGNATURE

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
SATSTIMA			26 Jul 58
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	
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. (Check each item in appropriate column; enter "NE" if not evaluated)	ABNO. (X)
18. HEAD, FACE, NECK, AND SCALP	
19. NOSE	
20. SINUSES	
21. MOUTH AND THROAT	
22. EARS—GENERAL (Ind. if not normal; Laboratory country under items 75 and 76)	
23. DRUMS (Perforation)	
24. EYES—GENERAL (Visual acuity and refraction under items 25, 26 and 27)	
25. OPHTHALMOSCOPIC	
26. PUPILS (Equality and reaction)	
27. OCULAR MOTILITY (Unaided parallel motion—horizontal, vertical)	
28. LUNGS AND CHEST (Include breaths)	
29. HEART (Thrust, size, rhythm, sounds)	
30. VASCULAR SYSTEM (Furrows, etc.)	
31. ABDOMEN AND VISCERA (Include hernia)	
32. ANUS AND RECTUM (Finger-beds, hemorrhoids, fissures, etc.)	
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 (Specialized tests under item 75)	
42. PSYCHIATRIC (Specify any personality deviations)	
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 /—Nonrestorable teeth	X—Missing teeth XXI—Replaced by dentures	
(S X F)—Fixed bridge, brackets to include abutments		
R I C H T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24	L E P T


## LABORATORY FINDINGS

45. URINALYSIS A. SPECIFIC GRAVITY	46. CHEST X-RAY (Place date, film number and result)
B. ALBUMIN	
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 F) 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

TAKUYO 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											
61. HEIGHT		62. WEIGHT		63. COLOR HAIR		64. COLOR EYES		65. BUILD <input type="checkbox"/> SLIM <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input type="checkbox"/> OBESE		66. TEMPERATURE	
67. BLOOD PRESSURE (Ave. of heart level)						68. PULSE (Ave. of heart level)					
A. SITTING		B. RECUMBENT		C. STANDING (5 min.)		D. SITTING		E. AFTER EXERCISE		F. 3 MIN. AFTER	
SYS. 120 DIA. 74		SYS. 120 DIA. 74		SYS. 120 DIA. 74		SYS. 120 DIA. 74		SYS. 120 DIA. 74		SYS. 120 DIA. 74	
69. DISTANT VISION				70. REFRACTION				71. NEAR VISION			
RIGHT 20/				BY				CORR. TO			
LEFT 20/				BY				CORR. TO			
72. METROPHORIA (Specify distance)											
R.		L.		P.		C.		D.		E.	
63. ACCOMMODATION		64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)		66. INTRACULAR TENSION			
RIGHT LEFT		67. RIGHT VISION (Test used and score)				68. REF. LENS TEST		69. INTRACULAR TENSION			
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)			
RIGHT HV		/15 BV		/15		250 500 1000 2000 4000 6000 8000					
LEFT HV		/15 BV		/15		250 500 1000 2000 4000 6000 8000					
73. NOTES (Continued) AND SIGNIFICANT OR INTERNAL 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 (Specify)

76. EXAMINEE (Check)

A. ☐ IS QUALIFIED FOR  
B. ☐ IS NOT QUALIFIED FOR

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

78. TYPED OR PRINTED NAME OF PHYSICIAN

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

79. TYPED OR PRINTED NAME OF PHYSICIAN

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

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

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

76. A. PHYSICAL PROFILE

P	U	L	M	E	B

B. PHYSICAL CATEGORY

A	B	C	E

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 (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

CLINICAL EVALUATION		
NO.	DESCRIPTION (Check each item in appropriate column, enter "NE" if not evaluated)	ABNOR.
18.	HEAD, FACE, NECK, AND SCALP	
19.	NOSE	
20.	SINUSES	
21.	MOUTH AND THROAT	
22.	EARS—GENERAL (Use 22-23 for abnormal; laboratory studies under items 73 and 74)	
23.	DRUMS (Perforation)	
24.	EYES—GENERAL (Normal acuity and refraction under items 25, 26 and 27)	
25.	OPHTHALMOSCOPIC	
26.	PUPILS (Equality and reaction)	
27.	OCULAR MOTILITY (Unaided; peripheral vision; accommodation)	
28.	LUNGS AND CHEST (Include breaths)	
29.	HEART (Thrust, size, rhythm, sounds)	
30.	VASCULAR SYSTEM (Femoral pulses, etc.)	
31.	ABDOMEN AND VISCERA (Include hernia)	
32.	ANUS AND RECTUM (Hemorrhoids, fissures; 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 (Equilibrium tests under item 74)	
42.	PSYCHIATRIC (Mood, personality, intelligence)	
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

(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 F)—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	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	F		
C																	T		
H																			
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

BEST AVAILABLE COPY

PRIVACY ACT MATERIAL REMOVED





## 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 known, street or R.F.D., city or town, state 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		
NO.	(Check each item in appropriate column, enter "NE" if not evaluated)	ABNO.
18.	HEAD, FACE, NECK, AND SCALP	MA.
19.	NOSE	
20.	SINUSES	
21.	MOUTH AND THROAT	
22.	EARS—GENERAL (Use 2 and 3 for military; 4 and 5 for civilian)	
23.	DRUMS (Perforation)	
24.	EYES—GENERAL (General vision, color, and refraction)	
25.	OPHTHALMOSCOPIC	
26.	PUPILS (Equality and reaction)	
27.	OCULAR MOTILITY (Unilateral, bilateral, convergent, divergent)	
28.	LUNGS AND CHEST (Include breaths)	
29.	HEART (Thrust, area, rhythm, sounds)	
30.	VASCULAR SYSTEM (Varicose veins, etc.)	
31.	ABDOMEN AND VISCERA (Include hernia)	
32.	ANUS AND RECTUM (Examine by rectal examination)	
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 (Abnormalities noted under item 39)	
42.	PSYCHIATRIC (Abnormalities and personality changes)	
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      (C X B)—Fixed bridge, brackets to include abutments /—Nonrestorable tooth      YYY—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	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"/> 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 (8 min.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER	
D. RECUMBENT		E. AFTER STANDING 2 MIN.		F. AFTER STANDING 5 MIN.		D. RECUMBENT		E. AFTER STANDING 2 MIN.		F. AFTER STANDING 5 MIN.	
89. DISTANT VISION						90. REFRACTION					
91. NEAR VISION						92. METEOROPHORIA (Specify distance)					
93. ACCOMMODATION						94. COLOR VISION (Test used and result)					
95. FIELD OF VISION						96. DEPTH PERCEPTION (Test used and score)					
97. RIGHT VISION (Test used and score)						98. RED LENS TEST					
99. INTRACULAR TENSION						100. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)					
101. HEARING						102. AUDIOMETER					
103. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY											

Using beta-gamma survey meter MI-5, background reading .03 -.06 m/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				
77. EXAMINEE (Check)					76. B. PHYSICAL CATEGORY				
78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER					76. C. PHYSICAL CATEGORY				
79. TYPED OR PRINTED NAME OF PHYSICIAN					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-465896

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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 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. DUTY OR SPECIALTY				TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

CLINICAL EVALUATION		
NOB- VAL	(Check each item in appropriate column; enter "N/E" if not evaluated)	ABNOB- VAL
<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. & see separate (Audiometry under items 75 and 77))	
<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 (Unaided parallel motion; fixation; accommodation)	
<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 (Femoralis, etc.)	
<input checked="" type="checkbox"/>	31. ABDOMEN AND VISCERA (Include hernia)	
<input checked="" type="checkbox"/>	32. ANUS AND RECTUM (Hemorrhoids, fissures; 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 (Ankle, foot; 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 (Reflexes, etc. under item 75)	
<input checked="" type="checkbox"/>	42. PSYCHIATRIC (Mood, personality, orientation)	
<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 1 thru 12 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      (B X F)—Fixed bridge, brackets to include abutments /—Nonrestorable tooth      XXX—Replaced by dentures		
R I C H T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17	L 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. EES	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 (4 mm of heart level)						88. PULSE (4 mm of heart level)					
A. SITTING SYS. 122 DIA. 71		B. RECUM- BENT SYS. DIA.		C. STANDING (5 min.) SYS. DIA.		89. A. SITTING		B. AFTER EXERCISE		C. 3 MIN. AFTER	
89. DISTANT VISION		90. REFRACTION		91. NEAR VISION							
RIGHT 20/ LEFT 20/		CORR. TO 20/ CORR. TO 20/		BY BY		S. S.		D1 D2		CORR. TO CORR. TO	
92. METEOROPHORIA (Specify distance)											
R <sup>0</sup>		L <sup>0</sup>		R. H.		L. H.		PRISM DIV.		PRISM CONV.	
93. ACCOMMODATION		94. COLOR VISION (Test near and far)		95. DEPTH PERCEPTION (Test near and far)		UNCORRECTED				CORRECTED	
RIGHT LEFT											
96. FIELD OF VISION		97. NIGHT VISION (Test near and far)		98. RED LENS TEST		99. INTRAOCULAR TENSION					
70. HEARING		71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test near and far)			
RIGHT WV /18 BV /18		250 500 1000 2000 4000 6000 8000 850 812 1024 2048 4096 6144 8192									
LEFT WV /18 BV /18		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

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

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

76. A. PHYSICAL PROFILE

P	U	L	M	E	B

B. PHYSICAL CATEGORY

A	B	C	E

NUMBER OF AT-  
TACHED SHEETS

U. S. GOVERNMENT PRINTING OFFICE: 1957 O-355200

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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)			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. TONSILS—GENERAL (Use 4 on tonsils; 4a subacute, tonsillitis under items 70 and 71)	
<input checked="" type="checkbox"/>	23. THROAT (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under items 40, 41, and 42)	
<input checked="" type="checkbox"/>	25. OPHTHALMOLOGIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (A coordinated, parallel movement, nystagmus)	
<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 veins, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Hemorrhoids, fistulae, fissures, 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 (Abnormalities under item 39)	
	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 1 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      X—Missing teeth      (X F)—Fixed bridge, brackets to include abutments /—Nonrestorable teeth      XXX—Replaced by dentures																																																																										
<table border="1"> <tr> <td>R</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>L</td> </tr> <tr> <td>I</td><td>32</td><td>31</td><td>30</td><td>29</td><td>28</td><td>27</td><td>26</td><td>25</td><td>24</td><td>23</td><td>22</td><td>21</td><td>20</td><td>19</td><td>18</td><td>17</td><td>E</td> </tr> <tr> <td>G</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>F</td> </tr> <tr> <td>H</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>T</td> </tr> </table>			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
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																																																									

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																																										
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 (Arms at heart level)						58. PULSE (Arms at heart level)																																				
A. SITTING SYS. 110 DIA. 72		B. RECUR- RENT DIA.		C. STANDING (5 min.) DIA.		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER		D. RECURRENT		E. AFTER STANDING 5 MIN.																												
59. DISTANT VISION				60. REFRACTION				61. NEAR VISION																																		
RIGHT 20/				CORR. TO 20/				BY				S.				OS				CORR. TO				BY																		
LEFT 20/				CORR. TO 20/				BY				S.				OS				CORR. TO				BY																		
62. METEOROPHORIA (Specify distance)																																										
63°		64°		R. H.		L. H.		PRISM DIV.		PRISM CONV.		CT		PC		PD																										
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)				UNCORRECTED																														
RIGHT LEFT												CORRECTED																														
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 WV /10 BY /10				<table border="1"> <tr> <td></td> <td>150 865</td> <td>300 618</td> <td>1000 1084</td> <td>2000 8048</td> <td>3000 8890</td> <td>4000 6090</td> <td>6000 6744</td> <td>8000 8198</td> </tr> <tr> <td>RIGHT</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> </tr> </table>									150 865	300 618	1000 1084	2000 8048	3000 8890	4000 6090	6000 6744	8000 8198	RIGHT									LEFT												
	150 865	300 618	1000 1084	2000 8048	3000 8890	4000 6090	6000 6744	8000 8198																																		
RIGHT																																										
LEFT																																										
LEFT WV /10 BY /10																																										
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY																																										

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 class numbers)

76. 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. D.					
79. TYPED OR PRINTED NAME OF PHYSICIAN		SIGNATURE					
CARL L. HANSEN, Lt Col, USAF, MC, -58							
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-452150

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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, 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		
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 (For 8 and 9, include A and B; for 10, include C and D)	
<input checked="" type="checkbox"/>	23. EARS (Perforation)	
<input checked="" type="checkbox"/>	24. EYES—GENERAL (Visual acuity and refraction under same 25, 40 and 67)	
<input checked="" type="checkbox"/>	25. OPHTHALMOSCOPIC	
<input checked="" type="checkbox"/>	26. PUPILS (Equality and reaction)	
<input checked="" type="checkbox"/>	27. OCULAR MOTILITY (Unaided parallel motion; convergent)	
<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.)	
<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 (Bones; feet; 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. DEEP LYMPHATICS	
<input checked="" type="checkbox"/>	41. NEUROLOGIC (Sensibility tests under item 39)	
<input checked="" type="checkbox"/>	42. PSYCHIATRIC (Mood, personality, personality disturbance)	
<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 31 thru 42 not examined

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

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

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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"/> OBES		56. TEMPERATURE	
57. BLOOD PRESSURE (A/P/M at Heart Level):						58. PULSE (A/P/M at Heart Level):					
A. SITTING		SYS. 186		D. RECUM- BENT 78		C. STANDING (5 MIN.)		A. SITTING		B. AFTER EXERCISE	
D. 186		D. 78		D. 186		D. 78		C. 3 MIN. AFTER		D. RECUMBENT	
59. DISTANT VISION						60. REFRACTION			61. NEAR VISION		
RIGHT 20/		CORR. TO 20/		BY		S.		OZ		CORR. TO	
LEFT 20/		CORR. TO 20/		BY		S.		OZ		CORR. TO	
62. METEOROPHORIA (Specify distance)											
ES°		ET°		R. N.		L. N.		PRISM DIV.		PRISM CONV.	
										PC PD	
63. ACCOMMODATION				64. COLOR VISION (Test card and result)				65. DEPTH PERCEPTION (Test card and curve)			
RIGHT		LEFT						UNCORRECTED			
								CORRECTED			
66. FIELD OF VISION				67. NIGHT VISION (Test card and curve)				68. RED LENS TEST			
								69. INTRACULAR TENSION			
70. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test card and curve)	
RIGHT WV		/10 BV		/10							
LEFT WV		/10 BV		/10							
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY											

In 30-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. <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 L. 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 ATTACHED SHEETS	

U. S. GOVERNMENT PRINTING OFFICE: 1967 O-441104

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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 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. RATINGS OR SPECIALTY			TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS

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. NO.	(Check each item in appropriate column; enter "NE" 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 (Specify later under items 76 and 77)		
X	23. EARS (Perforation)		
X	24. EYES—GENERAL (Specify later under items 78, 79 and 81)		
X	25. OPHTHALMOSCOPIC		
X	26. PUPILS (Symmetry and reaction)		
X	27. OCULAR MOTILITY (Unassisted parallel vision; lateral; up/down)		
X	28. LUNGS AND CHEST (Include breaths)		
X	29. HEART (Thrust, size, rhythm, sounds)		
X	30. VASCULAR SYSTEM (Varicosities, etc.)		
	31. ABDOMEN AND VISCERA (Include hernia)		
	32. ANUS AND RECTUM (Specimen later; examine 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 (Specify later under item 78)		
	42. PSYCHIATRIC (Specify any personality deviations)		
	43. PELVIC (Females only) (Check how done)		
	<input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL		

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 tooth /—Nonrestorable tooth X—Missing tooth XXX—Replaced by denture (O X /)—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	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	B. 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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PRIVACY ACT MATERIAL REMOVED

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 (AFTER 5 MIN. REST)						58. PULSE (AFTER 5 MIN. REST)					
A. SITTING		B. STANDING		C. AFTER EXERCISE		D. 3 MIN. AFTER		E. RECUMBENT		F. AFTER STANDING 3 MIN.	
SYS. 118		SYS. 118		SYS. 118		SYS. 118		SYS. 118		SYS. 118	
DIA. 81		DIA. 81		DIA. 81		DIA. 81		DIA. 81		DIA. 81	
59. BIVANT VISION				60. REFRACTION				61. NEAR VISION			
RIGHT 20/				CORR. TO 20/				BY			
LEFT 20/				CORR. TO 20/				BY			
62. HETEROPHOBIA (Specify distance)											
EX <sup>o</sup>		EX <sup>o</sup>		R. N.		L. N.		PRISM DIV.		PRISM CONV. CT	
63. ACCOMMODATION				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and result)			
RIGHT				LEFT				UNCORRECTED			
66. FIELD OF VISION				67. RIGHT VISION (Test used and result)				68. RED LENS TEST			
69. INTRAOCULAR TENSION				70. HEARING				71. AUDIOMETER			
RIGHT WY				/15 SV				/15			
LEFT WY				/15 SV				/15			
72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and result)				73. 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 M E S									
B. PHYSICAL CATEGORY									
A B C E									
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									
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									
SIGNATURE									
SIGNATURE									
SIGNATURE									
SIGNATURE									
NUMBER OF ATTACHED SHEETS									

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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.)
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Items 31 thru 42 not examined

(Continue in item 75)

### LABORATORY FINDINGS

PRIVACY ACT MATERIAL REMOVED

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 ( <i>Arm at heart level</i> )						58. PULSE ( <i>Arm at heart level</i> )							
A. SITTING SYS. DIA.		B. RECUMBENT SYS. DIA.		C. STANDING ( <i>3 min.</i> ) SYS. DIA.		A. SITTING		B. AFTER EXERCISE		C. 5 MIN. AFTER			
										D. RECURRENT			
										E. AFTER STANDING 5 MIN.			
59. DISTANT VISION				60. REFRACTION				61. NEAR VISION					
RIGHT 20/ CORR. TO 20/		BY		S.		CY		CORR. TO		BY			
LEFT 20/ CORR. TO 20/		BY		S.		CX		CORR. TO		BY			
62. METEOROPHOBIA ( <i>Spoon/y distance</i> )													
ES°		EX°		E. H.		L. H.		PRISM DIV.		PRISM CONV. CT			
PC		PD											
63. ACCOMMODATION				64. COLOR VISION ( <i>Faint word and result</i> )				65. DEPTH PERCEPTION ( <i>Faint word and score</i> )		UNCORRECTED			
RIGHT		LEFT								CORRECTED			
66. FIELD OF VISION				67. NIGHT VISION ( <i>Faint word and score</i> )				68. RED LENS TEST		69. INTRAOCULAR TENSION			
70. HEARING				71. AUDIOMETER						72. PSYCHOLOGICAL AND PSYCHOMOTOR ( <i>Faint word and score</i> )			
RIGHT MV		/10 SV		/10		250 800	500 612	1000 1084	2000 2048	3000 3200	4000 4200	5000 5144	6000 6192
LEFT MV		/10 SV		/10									
73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY													

(Use additional sheets if necessary)

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

76. 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

80. TYPED OR PRINTED NAME OF PHYSICIAN

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

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

**SIGNATURE**

**SIGNATURE**

**SIGNATURE**

**SIGNATURE**

### A. PHYSICAL PROFILE

P	U	L	H	E	S

#### D. PHYSICAL CATEGORY

A	B	C	E

NUMBER OF AT-  
TACHED SHEETS

U. S. GOVERNMENT PRINTING OFFICE: 1907 O-433206

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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. at heart level)						88. PULSE (A.P.M. at heart level)					
A. SITTING		B. RECUMBENT		C. STANDING (5 min.)		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER	
SYS. 120 DIA. 70		SYS. DIA. 		SYS. DIA. 		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER	
89. DISTANT VISION						90. REFRACTION					
RIGHT 20/ CORR. TO 20/ LEFT 20/ CORR. TO 20/						BY S. D. CORR. TO BY					
91. NEAR VISION						92. METEOROPHORIA (Specify distance)					
ES° EX° R. N. L. N. PRISM DIV. PRISM CORV. PC PD						CT					
93. ACCOMMODATION						94. COLOR VISION (Test used and result)					
RIGHT LEFT						95. DEPTH PERCEPTION (Test used and score)					
96. FIELD OF VISION						97. NIGHT VISION (Test used and score)					
98. RED LENS TEST						99. INTRAOCULAR TENSION					
70. HEARING						71. AUDIOMETER					
RIGHT HV /15 SV /15						250 500 1000 2000 3000 4000 6000 8000					
LEFT HV /15 SV /15						RIGHT LEFT					
72. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)											

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. <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 <b>CARL L. HANSEN, Lt Col, USAF, MC-PS</b>		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-451266

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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., city or town, state and Zip)			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		ABNO-
NO.	(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) (Specify under items 22 and 23)	
X	23. DRUMS (Perforation)	
X	24. EYES—(General) (Specify under items 24, 25 and 27)	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Examine parallel, convergent, divergent)	
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 breasts)	
	32. ANUS AND RECTUM (Examine hands, feet)	
	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 (Examine hands, feet under item 37)	
	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 8/ upper and lower teeth, respectively)																		REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES	
O—Restorable teeth      X—Missing teeth      (C X B)—Fixed bridge, bracket to include abutments /—Nonrestorable teeth      Y Y Y—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		

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											
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 at heart level)						58. PULSE (Apm at heart level)					
A. SITTING SYS. 118 DIA. 76		B. RECUMBENT SYS. DIA.		C. STANDING (3 min.) SYS. DIA.		A. SITTING		B. AFTER EXERCISE		C. 2 MIN. AFTER	
59. DISTANT VISION		60. REFRACTION		61. NEAR VISION							
RIGHT 20/ LEFT 20/		CORR. TO 20/ CORR. TO 20/		BY BY		S. S.		CX CX		CORR. TO CORR. TO	
62. METEOROPHOBIA (Specify symptoms)											
ES°		EX°		B. N.		L. N.		PRISM DIV.		PRISM CONV. CT	
63. ACCOMMODATION		64. COLOR VISION (Test used and score)				65. DEPTH PERCEPTION (Test used and score)		66. INTRACULAR TENSION			
RIGHT LEFT											
67. FIELD OF VISION		68. RIGHT VISION (Test used and score)				69. RED LENS TEST		70. PSYCHOLOGICAL AND PSYCHOMOTOR (Test used and score)			
71. HEARING		72. AUDIOMETER									
RIGHT HV /15 SV /15		250 500 1000 2000 4000 8000 16000									
LEFT HV /15 SV /15		RIGHT LEFT									
73. NOTES (Comments) 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. <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 73					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-438888

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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 25 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.	(Check each item in appropriate column, enter "N" if not evaluated.)	ABNO.
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 9 for external; 10 and 11 for internal)	
X	23. EARS (Perforation)	
X	24. EYES—GENERAL (Visual acuity and refraction)	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Unaided; special tests; covered; unaided)	
X	28. LUNGS AND CHEST (Include breaths)	
X	29. HEART (Thrust, size, rhythm, sounds)	
X	30. VASCULAR SYSTEM (Pulse, blood pressure, etc.)	
	31. ABDOMEN AND VISCERA (Include hernia)	
	32. ANUS AND RECTUM (Examine hands, anus)	
	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 reflexes, tests under 79)	
	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 /—Non-restorable teeth X—Missing teeth XXX—Replaced by dentures (B X F)—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 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 E Q 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 F M 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 Y 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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~~\_\_\_\_\_~~  
TAKUCC

總上諸書

<u>Name</u>	<u>W, B, C</u>	<u>PR</u>	<u>Ur</u>	<u>Suger</u>
	4000			
	3200			
	4800			
	4200			
	3800			
	3200			
	4600			
	3500			
	3000			
	4000			

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

NOT DONE

[REDACTED]

PRIVACY ACT MATERIAL REMOVED

PRIVACY ACT MATERIAL REMOVED

海上保安庁水陸部

TAKUIC

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

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

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PRIVACY ACT MATERIAL REMOVED

PRIVACY ACT MATERIAL REMOVED

[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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PRIVACY ACT MATERIAL REMOVED

TABULATION OF LAB RAT BY BLOOD EXAMINATIONS

TABLE 1

28 July 1968

Name	HEMOGLOBIN (g/dl) %	INTRAVENOUS BLOOD SAMPLE (X) TAKEN	RBC	WBC	WHITE BLOOD CELL DIFFERENTIAL				
					H	B	L	M	P
1.	108		5,200,000	4700	20	2	-	2	74
2.	108		5,150,000	4550	44	2	-	8	46
3.	94		4,630,000	4100	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		4,270,000	5850	42	-	4	2	52
7.	98	X	4,620,000	9500	48	-	-	2	50
8.	98	X	4,430,000	8400	49	8	-	-	43
9.	110	X	4,600,000	6200	68	-	-	3	29
10.	78	X	5,100,000	8700	68	-	-	-	32
11.	108	X	5,280,000	8400	48	4	2	-	46
12.	94	X	4,640,000	7550	42	-	-	6	52

TABLE 2

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.	108		5,280,000	7550	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	11300	55	10	5	6	24
22.	104		4,740,000	6050	30	-	2	2	66
23.	106		5,380,000	4850	42	6	-	-	52
24.	108		4,680,000	5320	42	4	2	6	46

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[REDACTED]

NAME AND NUMBER	BLOOD RESULTS RABAU CLINIC 19 & 25 JULY 1958								OUR RESULTS (RABAU) AND ARMED FORCES INSTITUTE OF PATHOLOGY REPORT ON SMEARS - 26 JULY 1958								
	(SAHLI)	RBC	WBC	N	B	E	M	L	HBO%	RBC	WBC	N	B	E	M	L	PLATELETS
	HBO%	x10 <sup>6</sup>								x10 <sup>6</sup>							
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	} Not Done					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 yester.

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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[REDACTED]

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 atom 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."

Takujo 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, filing 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. Hasler 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 Hasler.

On deck the language difficulties continued. Dr. Hasler, 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]

2

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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 know 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 RABAUL

Ashore the next day he smiled 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 fringe 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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[REDACTED]

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

[REDACTED]

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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 Tegari who said at a House of Representatives Foreign Affairs Committee meeting that the Japanese Coast Guard boats Takuyo and Satusma were outside the Bikini danger zone when they received atomic dust.

\* \* \*

Mrs. Tegari 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.

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Doctors en 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 Satsuma 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.

[REDACTED]

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[REDACTED]

PERSONNEL

TAKUYO MARU

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

SATUNO MARU

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

[REDACTED]

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**BEST AVAILABLE COPY**

**BEST AVAILABLE COPY**

As a result of our examination of the vessel and its equipment and the findings of our examination of the vessel and its equipment, 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.

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<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, USAF 20818A	
GOEKE, Roscoe H.	Post Falls, Idaho 31 Dec 1917	Yes	CTG 7.5	CAPT, USPHS PHS-3124	
HANSEN, Carl L., Jr.	Springfield (Hampden), Mass. 23 Jan 1920	Yes	TG 7.4	LTCOL, USAF 19353A	

CREW

FRAZEE, Malcolm C.	San Diego (San Diego), Calif. 13 April 1923	Yes	TG 7.4 PAR ELEMENT	LTCOL, USAF 15564A	
FLEMING, Russell A. (Co-Pilot)	Los Angeles (Los Angeles) Calif. 16 Jan 1932	Yes	TG 7.4 PAR ELEMENT	1ST LT, USAF AO-3203110	
WILLARD, Ernest W. III (Navigator)	Knoxville (Knoxville) Tenn. 5 June 1927	Yes	TG 7.4 PAR ELEMENT	CAPT, USAF AO-591284	
WARD, James F. (Radio Operator)	Homes, Florida, 6 May 1927	Yes	TG 7.4 PAR ELEMENT	S/SGT, USAF AF-44113670	
BORING, John O.	Vinton, Ohio, 26 Nov 1932	Yes	TG 7.4	S/SGT, USAF AF-15296125	

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RELATED  
RECORDS



PRIVACY ACT MATERIAL REMOVED

**"BATSUMA"**

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Hb 100% 2  
Hb 90% 3  
Hb 100% 4  
Hb 100% 5  
Hb 100% 6  
Hb 90% 7  
Hb 100% 8  
Hb 100% 9  
Hb 100% 10  
Hb 100% 11  
Hb 100% 12

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PRIVACY ACT MATERIAL REMOVED

"SATSUMA"

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PRIVACY ACT MATERIAL REMOVED

• SATSUMA •

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5

  
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.


"NO-REPRODUCTION NOT REQUIRED EXCEPT PRIOR TO  
CATEGORY B INFORMATION-THIS SIGNATURE HAVE ALL  
INTERNAL SECURITY INFORMATION-NO-REPRODUCTION PRIOR  
TO DECLASSIFICATION-NO 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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