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CONFIDENTIAL

September 2, 1954

M. F. Mayler

Re: Mary Lukasiewicz (deceased)
#346

Her medical record, based on her last periodic examination of November 2, 1951, indicates that Mrs. Lukasiewicz was out for 4½ months on Leave of Absence due to bursitis of the right shoulder. She had lost 14 pounds because of her illness. Dr. Pauly's examination indicated no change in her heart size and no gross abnormalities. He observed that her general condition was good.

The patient was separated on February 2, 1952 and I had no occasion or opportunity to examine her up to the time of her demise.

A review of X-rays of Mrs. Lukasiewicz is as follows:

1. March, 1932 - Cardiac shadow is not enlarged and lungs show hypoventilation.

2. November 28, 1939 - Left border appears enlarged but I believe this is due to transverse rotation and failure to get the film at complete inspiration.

3. June 18, 1942 - Poor film; no interpretation.

4. February 22, 1944 - There is some evidence of minimal fibrosis at both lower lobes with hilar adenopathy. The left border of the heart is not well defined.

5. November 17, 1947 - There is a progression in the fibrosis of both lower lobes, more prominent on the left side.

6. June 16, 1949 - Shows further progression of the fibrosis with increasing hilar adenopathy. Progression seems to be more pronounced in left lower lobe.

7. December 11, 1950 - Progression now appears to be more pronounced in right lower lobe, with scattered areas of nodulation apparently superimposed on underlying fibrosis. The left border of the heart is shaggy and poorly defined.

8. April 30, 1952 - Further progression of the above process with gradual obliteration of both costophrenic angles.

9. July 28, 1954 - There is diffuse infiltration with superimposed nodulation scattered throughout the upper and lower lobes on the right side and progressive fibrosis in the lower part of the left lung. The diaphragmatic margins are not well defined and the pulmonary conus appears prominent.

COMMENT: The above findings are compatible with prolonged exposure to Asbestos with superimposed secondary infection. I am informed that the Death Certificate is recorded as pulmonary Asbestosis, probably bronchogenic carcinoma. Physician certifying death was Dr. Alan J. Stolow. I am unable to comment on the cause of death, not having had the opportunity to examine the patient prior to her death. The confirmation of Dr. Stolow's diagnosis could best be obtained by having an autopsy performed on the deceased person.