PLAINTIFF'S EXHIBIT
UC-243

UNION CARBIDE

April 17, 1974

Mr. Robert H. Mereness
Executive Director
Asbestos Information Association/North America
1660 L. Street, N.W.
Washington, D.C. 20036

Dear Mr. Mereness:

I have been told that consideration is being given to some changes in the Occupational Safety and Health Law as regards the Asbestos Standard 1910.93A. Under (j) Medical Examinations, it states:

(3) Annual Examinations. On or before January 31, 1973, and at least annually thereafter, every employer shall provide, or make available, comprehensive medical examinations to each of his employees engaged in occupations exposed to airborne concentrations of asbestos fibers. Such annual examinations shall include, as a minimum, a chest roentgenogram (posterior anterior 14 x 17 inches), a history to elicit symptomatology of respiratory disease, and pulmonary function tests to include forced vital capacity (FVC) and forced expiratory volume at 1 second (FEV).

(6) Medical Records--(i) Maintenance. Employers of employees examined pursuant to this paragraph shall cause to be maintained complete and accurate records of all such medical examinations. Records shall be retained by employers for at least 20 years.

It is my understanding that consideration is being given to a change in the wording of this part of the regulation in order to provide that such examinations would be conducted outside of the premises by an independent government-sponsored group of physicians and that the records would not be made available to the employer.

Should this change be made, the employer would be kept in the dark concerning the health of his employees. It would be useless for him to

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employ a Medical Department or indeed to provide physical examinations for his employees. This is especially true in those large corporations which for many years have been providing examinations to detect early signs of disease among workers. In my opinion this would work to the detriment of the employees and therefore should not be considered.

Very truly yours,

John J. Welsh, M.D.
Corporate Medical Director

JJW:BA

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UNION CARBIDE

INTERNAL CORRESPONDENCE

MINING AND METALS DIVISION

270 PARK AVENUE, NEW YORK, NEW YORK 10017

To (Name) Dr. J. J Welsh
Division 4th Floor
Location

Date April 16, 1974
Originating Dept.
Answering letter date

Copy to Messrs. W. J. Kovack
H. B. Rhodes

Subject Toxicology

This is a follow up to our recent telephone conversation requesting the views of Union Carbide's Medical Department on the confidentiality of employee physical examinations as related to the OSHA asbestos regulations. Background information on this matter is attached. A statement of your opposition to such a move, together with substantiating reasons, would be most helpful to our activities in conjunction with the Asbestos Information Association in opposing such a change in the OSHA asbestos regulations.

W. C. Thurber

WCT:es
Attachment

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MEDICAL DEPARTMENT

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UNION CARBIDE

INTERNAL CORRESPONDENCE

AIA mtg. (FW 11/

MINING AND METALS DIVISION • P. O. BOX 579, NIAGARA FALLS, NEW YORK 14302

To (Name)	Mr. W. C. Thurber	Date	March 4, 1974
Division	UCC Mining & Metals		
Location	38th Floor 270 Park Avenue New York, NY 10017	Originating Dept.	"Calidria" Asbestos
		Answering letter date	
Copy to	Mr. J. L. Myers File	Subject	Toxicology

Dear Bill:

Here are three items relating to the above subject where your recommendations are requested.

1. Confidentiality of Physical Examinations

At our first Technical Advisory Committee meeting, Ed Fenner mentioned that a very strong push is expected from the Unions to make the results of employee physical examinations confidential. This means that the company does not have access to the results and only gets a statement from the examining physician that the man is able or unable to work. This position was also reported to have considerable support from OSHA.

A request was made that the Corporate Medical Directors of the various companies represented be asked to state their position on this matter and provide any supporting evidence or information re the position that they felt was appropriate. This would be used by the AIA/NA Medical Advisory Committee to evaluate if an industry position should be taken and if so what it should be. I assume that the final results will be subject to the same review by the Board of Directors as the Technical Committee recommendations but this was not explicitly stated.

It seems to me that this would be a good matter for you to discuss with Dr. Dernehl. If you agree, please proceed. If not, please advise.

2. Consumer Product Safety Commission

The attached article came to my attention today. I suspect that this Commission has no background in asbestos and "only know what they read in the papers." Some missionary work by Bob Mereness before the activist petitions to ban asbestos containing consumer goods start to come in may be very useful. It is suggested that this matter be brought up at the next Board of Directors' meeting.

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