

DEPARTMENT OF THE ARMY
Valley Forge General Hospital
Phoenixville, Pennsylvania 19460

SPECIAL ORDERS
NUMBER 173
EXTRACT

11 August 1971

3. TC 290. The following individual, having appeared before a PHYSICAL EVALUATION BOARD, is ordered to place designated to await final orders and disposition as directed by the Secretary of the Army. Individual will proceed on PERMANENT CHANGE OF STATION to place designated and will remain thereat to await further orders in connection with his PHYSICAL evaluation board proceedings. Leave will be charged against the individual's accrued leave for each day while in an awaiting orders status to the extent available. Basic Allowance for Subsistence and Basic Allowance for Quarters, with ~~XXXXXXXXXX~~ dependents, authorized.

MUZA, LOUIS S. 199 24 8927 SFC 63Z5H MHC0(WOQ5HD)VFGH PA 19460

ADMINISTRATIVE ACCOUNTING DATA

Auth: AR 635-40

HOR: New Cumberland Pennsylvania

Acc lv: Unknown

PCS MDC: 3AE2

FOR THE INDIVIDUAL

Assigned to: Box 1238RD #1 Etters Pennsylvania 17319

Effective date: 11 August 1971

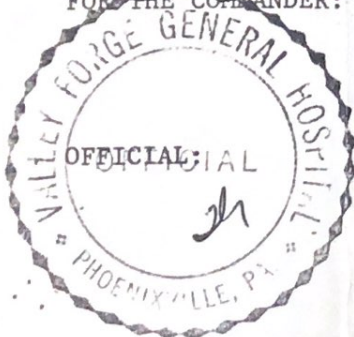
Special Instructions: Active duty ID card has been surrendered at this station.

Request this order be honored in lieu of ID card until

Retired - 90 days

Weapon/Firearm will not be transported incident to travel.

FOR THE COMMANDER:



HERMAN E. RICHARDSON
LTC, MSC
ADJUTANT

R. HAHN
MAJ, MSC
ASST ADJUTANT
DISTRIBUTION:

20 - Trf Pt

DEPARTMENT OF THE ARMY
OFFICE OF THE ADJUTANT GENERAL
Washington, D.C. 20315

AGPO-R

7 Sep 71

LETTER ORDERS NUMBER D 9-275

SUBJECT: Enlisted Disability Retirement

SFC LOUIS S. MUZA
199-24-8927 63Z5H
Valley Forge General Hospital
Phoenixville, PA 19460

TC 375. The above named individual having been determined to be PERMANENTLY unfit for duty by reason of physical disability, is relieved from assignment and duty and placed on the RETIRED LIST as indicated.

ADMINISTRATIVE ACCOUNTING DATA

Auth (Ret): 10 USC 1201

SPN: 271

Eff date (REFRAD): 14 Sep 71

Place ret: Etters, PA

PCS MDC: 7BE2

FOR THE INDIVIDUAL

Date placed on retired list: 15 Sep 71

Retired grade: SFC

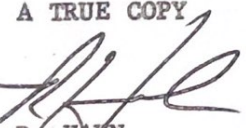
Percentage of disability: 60%

Special Instructions (APPENDIX B, AR 310-10): 83

BY ORDER OF THE SECRETARY OF THE ARMY:

/s/ J. SLONE
Adjutant General

A TRUE COPY


R. HAHN
MAJ, MSC

DISTRIBUTION:

60 - Trf Pt

2 - Finance

1 ea - Mil Pers Br; Msg Ctr; C, Tng Br; Registrar; Adj's Ofc; MHCo; Army Community Svc Div;
Family Housing Svc Div; MR. LAWRENCE, Bldg 62.

MEDICAL BOARD PROCEEDINGS (AR 40-212)

INSTALLATION **Valley Forge General Hospital, Phoenixville, Pa. 19460** DATE **29 JUL 1971**

1. LAST NAME - FIRST NAME - MIDDLE INITIAL

MUZA, Louis S.

2. GRADE 3. SERVICE NUMBER 4. COMPONENT 5. AGE 6. SEX

SFC

199-24-8927

RA

40

M

7. HOME ADDRESS

**R.D. #1, Box 123-B
Etters, Pennsylvania 17319**

8. DEPARTMENT OR SERVICE

U.S. Army

9. ORGANIZATION OR UNIT

MHC, VFGH, Phoenixville, Pennsylvania

10. TOTAL YEARS MILITARY SVC

a. ACTIVE

b. INACTIVE

18 8/12

-

11. DATE ENTERED CURRENT TOUR OF ACTIVE DUTY

23 Mar 69

12. CURRENT AERO RATING

N/A

13. ON FLYING STATUS AT TIME OF ADMISSION

☐ YES

☒ NO

14. MILITARY OCCUPATIONAL SPECIALTIES

TITLE

CODE

TIME IN EACH

a. Maintenance

63Z5H

b.

c.

15. HOSPITAL RECORD

a. DATE ADMITTED TO THIS INSTALLATION

10 May 71

b. FACILITY TRANSFERRED FROM

c. INITIALLY ADMITTED (Facility)

d. DATE INITIALLY ADMITTED

10 May 71

ACTION BY THE BOARD

BY DIRECTION OF THE APPOINTING AUTHORITY, THE BOARD CONVENED TO EVALUATE THE PATIENT IDENTIFIED ABOVE

16. THE PATIENT ☒ WAS ☐ WAS NOT PRESENT DURING THE PROCEEDINGS.

17. THE PATIENT ☐ DID ☒ DID NOT PRESENT ANY VIEWS IN HIS OWN BEHALF. (If the patient did present views in his own behalf, include a summary of his statement in "Continuation", or attach additional sheet(s)).

AFTER CAREFUL CONSIDERATION OF CLINICAL RECORDS, LABORATORY FINDINGS, HEALTH RECORDS, AND MEDICAL EXAMINATIONS, THE BOARD FINDS:

18. THE PATIENT IS ☐ MEDICALLY FIT ☒ MEDICALLY UNFIT FOR FURTHER MILITARY SERVICE IN ACCORDANCE WITH CURRENT MEDICAL FITNESS STANDARDS.

19. THE PATIENT HAS THE FOLLOWING MEDICAL CONDITIONS AND/OR PHYSICAL DEFECTS: (List all diagnoses, whether or not disqualifying. Use Joint Armed Forces standard terminology and diagnostic code.)

- Dg. 1 Arteriosclerotic cardiac disease, status post anterior myocardial infarction with anginal syndrome; myocardial infarction, lateral, second episode, sustained on 8 Jun 71. AHA F/T Class II-B/C. AR 40-501, Chap. 3-21, Para. a.
- Dg. 2 Anxiety reaction, mild.
- Dg. 3 Meralgia paresthetica.
- Dg. 4 Deafness, partial, bilateral.
- Dg. 5 Hyperlipidemia, under dietary therapy.
- Dg. 6 Tinnitus.
- Dg. 7 Myopia, bilateral.
- Dg. 8 Presbyopia, bilateral.

20. DETAILS OF MEDICAL CONDITIONS AND/OR PHYSICAL DEFECTS LISTED UNDER ITEM 19

LINE OF DUTY a	APPROXIMATE DATE OF ORIGIN b	CAUSE INCIDENT TO SERVICE		EXISTED PRIOR TO ENTRY ON ACTIVE DUTY		AGGRAVATED BY ACTIVE DUTY		OPTIMUM HOSP IMPROVEMENT FOR DISPOSITION PURPOSES		MAXIMUM HOSP BENEFIT RECEIVED	
		c. YES	d. NO	e. YES	f. NO	g. YES	h. NO	i. YES	j. NO	k. YES	l. NO
(1) Yes	1971	X			X		X	X		X	
(2) Yes	1971	X			X		X	X		X	
(3) Yes	1971	X			X		X	X		X	
(4) Yes	1969	X			X		X	X		X	
(5) Yes	1971	X			X		X	X		X	

21. BRIEF SUMMARY OF MEDICAL CONDITIONS AND PHYSICAL DEFECTS IN Nontechnical Language
Heart disease; mild anxiety reaction; meralgia paresthetica; hyperlipidemia; high frequency hearing loss; tinnitus.

22. THE BOARD RECOMMENDS THAT THE PATIENT BE:

Referred to a Physical Evaluation Board.

23. THE BOARD RECOMMENDS THE FOLLOWING ASSIGNMENT LIMITATIONS:

N/A

24. THE PATIENT ☐ DOES ☒ DOES NOT DESIRE TO CONTINUE ON ACTIVE DUTY UNDER AR 616-41. (Complete when patient is found medically unfit.)
(Complete Items 25 and 26 when answer to Item 24 is affirmative)

25. THE PATIENT ☐ IS ☐ IS NOT MEDICALLY QUALIFIED FOR CONTINUANCE ON ACTIVE DUTY.

26. THE BOARD RECOMMENDS ☐ CONTINUATION ON ACTIVE DUTY ☐ PROCESSING FOR SEPARATION.

27. UNANIMOUS DECISION ☒ YES ☐ NO

28. TYPED NAME, GRADE & BRANCH OF BOARD MEMBER (President) SIGNATURE
CASIMIR A. GORCZYCA, COL, MC *Casimir A. Gorczyca*

29. TYPED NAME, GRADE & BRANCH OF BOARD MEMBER SIGNATURE
SNOWDEN C. HALL, III, MAJ, MC *Snowden C. Hall III*

30. TYPED NAME, GRADE & BRANCH OF BOARD MEMBER SIGNATURE
EDWARD M. OVERFIELD, MAJ, MC *Edward M. Overfield*

ACTION BY APPROVING AUTHORITY

31. ☒ THE FINDINGS AND RECOMMENDATIONS OF THE BOARD ARE APPROVED.

32. ☐ THE PROCEEDINGS OF THE BOARD ARE RETURNED FOR RECONSIDERATION.

33. ☐ THE FINDINGS OF THE BOARD ARE DISAPPROVED AND FORWARDED TO THE SURGEON GENERAL. RECOMMENDATIONS ARE ATTACHED AS INCLOSURE NO.

34. TYPED NAME, GRADE & TITLE OF APPROVING AUTHORITY SIGNATURE DATE
FRANK J. SHANNON, JR., COL, MC *Frank J. Shannon Jr.* 30 Jul 71
DEPUTY COMMANDER

ACTION BY PATIENT

35. I HAVE BEEN INFORMED OF THE APPROVED FINDINGS AND RECOMMENDATIONS OF THE BOARD. I DO NOT AGREE WITH THE BOARD'S ACTION AND DESIRE TO APPEAL. MY WRITTEN APPEAL IS ATTACHED AS INCLOSURE NO.

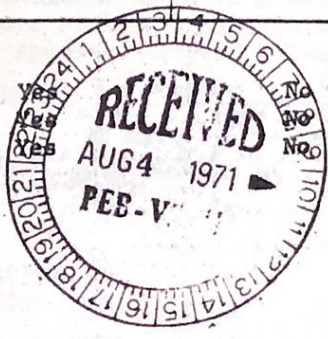
36. TYPED NAME, GRADE AND SERVICE NUMBER SIGNATURE DATE
LOUIS S. MUZA, SFC, 199-24-8927 *Louis S. Muza* 2 AUG 1971

FURTHER ACTION BY APPROVING AUTHORITY

37. THE APPEAL HAS BEEN CONSIDERED AND THE ORIGINAL BOARD ACTION IS ☐ CONFIRMED ☐ RETURNED FOR RECONSIDERATION. (The Board's further action will be attached as Inclosure No.)

38. TYPED NAME, GRADE & TITLE OF APPROVING AUTHORITY SIGNATURE DATE

CONTINUATION (Identify by item number)
#20. cont.
(6) Yes 1969
(7) Yes Unknown
(8) Yes Unknown



No	Yes	Yes
No	Yes	Yes
No	Yes	Yes

CLINICAL RECORD		NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED	

(Sign and date at end of narrative)

MILITARY HISTORY: 18-1/2 years Active Duty. MOS 63ZH Maintenance Instructor E7. Most recently stationed at Asamara, Ethiopia.

SOCIAL AND FAMILY HISTORY: Smokes 2 packs a day, none since his heart attack. Occasional alcohol. Mother died of renal failure, father had an MI at age 56. One brother died suddenly after chest accident and one brother died of war injuries.

PAST MEDICAL HISTORY: Previous surgery for hemorrhoids, appendectomy. Had carbon monoxide poisoning while stationed in Alaska in 1965, without residual. No medications. No known allergies.

REVIEW OF SYSTEMS: High frequency hearing loss with an H-2 profile. Chronic laryngitis. History of choroidoretinitis in the past with blurred vision on the left. Mild morning cough without shortness of breath. Hemorrhoids.

PRESENT ILLNESS: This 40-year-old male developed the sudden onset of gripping chest pain which awakened the patient at about 0300 hours 11 Mar. He had noted 3 or 4 attacks of much milder pain in the previous 6 - 8 months and at the time of his sudden illness he was quite depressed because of the news that 3 of the patient's good friends were shot down and killed in an air crash. He was admitted to the hospital in Asamara and abnormalities of the electrocardiogram were noted. He was placed at bed rest with gradual ambulation and had a benign course of post myocardial infarction. Since his discharge he has had occasional left chest pain without shortness of breath relieved by standing still. Nitroglycerin takes approximately 10 minutes to relieve the pain. Since the time of his myocardial infarction, his weight had gone up from 191 to 208 lbs and he has required 4 to 5 nitroglycerin a week for relief of exertional chest pain.

PHYSICAL EXAMINATION: Well-nourished, well-developed male in no acute distress, blood pressure 132/88, pulse 78. Weight 208. Eyes - pupils equal and reactive to light and accommodation. Fundi benign. Ears - tympanic membrane intact. Nose clear. Throat - enlarged tonsils without exudates. Neck - supple, shotty nodes. Chest - equal expansion bilaterally, few basal rhonchi which clear with coughing. No rales. Heart - PMI in the 5th intercostal space midclavicular line, A2 greater than P2. Grade I/VI left sternal border murmur with ejection quality without change in respiration. No gout. Abdomen - liver, spleen, kidneys not palpable.

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN NORMAN P SILVERS MAJ MC	DATE 25 May 71	IDENTIFICATION NO. 199-24-8927	ORGANIZATION
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
MUZA, Louis S. SFC VALLEY FORGE GENERAL HOSPITAL PHOENIXVILLE, PENNSYLVANIA			

NARRATIVE SUMMARY
Standard Form 502
2-107-02

CLINICAL RECORD		NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED	
(Sign and date at end of narrative)			

2

Bowel sounds active, no rebound or tenderness. Back - without CVA tenderness or pain. Spine straight. Testes - descended bilaterally, firm; uncircumcised male. Rectal - 1+ prostate with small hemorrhoids. Extremities - good pulses, no joint pain.

Neurologic testing - deep tendon reflexes intact. Decreased pain sensation over the lateral thigh. Other sensory testing intact. Cerebellar - no nystagmus or tremor. Motor - good, equal strength.

LABORATORY DATA: Chest x-ray normal. STS nonreactive. White count 6400, 46 neutrophils, 50 lymphs, 4 eos, hematocrit 40. Urinalysis normal. BUN 18. 2 hr PC blood sugar 90. Triglycerides 363. Cholesterol 322. Serum cloudy, type III hyperlipidemia. EKG showed ST elevation lead 3 and F with depression in aVL, T inversion aVL and V2, QS in V1 to 2 with a Q in V3 to 5. Old anteroseptal damage with question of inferior pericardial disease.

CONSULTATIONS: Ophthalmological Consultant found pigmentation around the vortex veins of the fundus with disk and fundic vessels normal. Diagnosis: Entropic phenomenon without evidence of choroidoretinitis is made and no profile.

Hearing Consultant found a mild high frequency hearing loss.

HOSPITAL COURSE: Patient required approximately 2 or 3 nitroglycerin every 3 days for relief of pain of a typical anginal nature which occurred after prolonged walking or mild exercise. He was sent home on 3 day pass and required only one nitroglycerin during that period of time and seemed to be able to climb a flight of steps without difficulty. His elevated lipids were noted and the diet was changed to a reducing 1600 cal. type III hyperlipidemic diet which he was placed on 13 May. By the time of dictation his weight had dropped to 202 pounds.

PRESENT CONDITION: At present, Sgt. Muza has mild angina with moderate exertion relieved by nitroglycerin. He continues to be somewhat overweight but it is hoped that with remaining on diet that this will improve, as should his hyperlipidemia.

(Continued)

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN NORMAN P SILVERS MAJ MC	DATE 25 May 71	IDENTIFICATION NO. 199-24-8927	ORGANIZATION
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility) MUZA, Louis S. SFC VALLEY FORGE GENERAL HOSPITAL PHOENIXVILLE, PENNSYLVANIA		REGISTER NO.	WARD NO.

NARRATIVE SUMMARY
Standard Form 502
502-107-02

CLINICAL RECORD		NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED	

(Sign and date at end of narrative)

3

- DIAGNOSES:
1. Arteriosclerotic cardiac disease, status post anterior myocardial infarction with anginal syndrome, American Heart Association Classification II-B.
 2. Anxiety reaction, mild.
 3. Meralgia paresthetica.
 4. High frequency hearing loss.
 5. Hyperlipidemia, under dietary therapy.

RECOMMENDATIONS: This patient is unfit for further military service under AR 40-501, Section XI, 3-21a. However, because of his relatively asymptomatic condition the Medical Board feels that a waiver should be granted for additional Service time. It is recommended that he be presented to a Physical Evaluation Board for final determination. Assignment limitations are as follows: No crawling, stooping, running, jumping, prolonged standing or marching. No strenuous physical activity. No assignment to isolated areas where definitive medical care is not available. (MAAG - Military Missions, etc.).

- Additional Diagnoses:
6. Tinnitus.
 7. Myopia, bilateral.
 8. Presbyopia, bilateral.

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN NORMAN R. SILVERS MAJ MC	DATE 25 May 71	IDENTIFICATION NO. 199-24-8927	ORGANIZATION
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility)		REGISTER NO.	WARD NO.
MUZA, Louis S. SEC VALLEY FORGE GENERAL HOSPITAL PHOENIXVILLE, PENNSYLVANIA			

NARRATIVE SUMMARY
Standard Form 502
502-107-02

CLINICAL RECORD		NARRATIVE SUMMARY	
DATE OF ADMISSION	DATE OF DISCHARGE	NUMBER OF DAYS HOSPITALIZED	

(Sign and date at end of narrative)

-4-

On 8 Jun 71, while resting in bed, the patient developed acute left anterior precordial chest pain lasting 15-20 minutes, not relieved by nitroglycerin and associated with diaphoresis. Subsequently, serial electrocardiographic studies and enzyme studies documented the second episode of myocardial infarction in the lateral wall. EKG on 9 Jun 71 showed inversion of T-wave in I, AVL and V₅₋₆ associated with CPK 790, LDH 1410 and SGOT 309.

His recovery was uncomplicated with no signs of congestive heart failure or arrhythmia. He was granted a month of convalescent leave on 25 Jun 71.

PRESENT CONDITION: He seems to have recovered uneventfully from the second episode of myocardial infarction. His cardiac status remains as II-B. to C.

DIAGNOSIS: Myocardial infarction, lateral, second episode, sustained on 8 Jun 71, with subsequent anginal attacks 1-2 times a week.

RECOMMENDATIONS: In accordance to AR 40-501, Chap. 3-21, Para. a, the patient is unfit for retention in the Army. Despite his second myocardial infarction, he remains relatively symptom free. Therefore, it is the recommendation of this examiner that a waiver be granted for an additional 1½ years of service time. The patient is to be referred to a Physical Evaluation Board for final determination.

(Use additional sheets of this form (Standard Form 502) if more space is required)

SIGNATURE OF PHYSICIAN YOSHIRO MATSUO, MAJ, MC	DATE 7 Jul 71	IDENTIFICATION NO. 199-24-8927	ORGANIZATION
PATIENT'S IDENTIFICATION (For typed or written entries give: Name—last, first, middle; grade; date; hospital or medical facility) MUZA, Louis S. SFC Valley Forge General Hospital Phoenixville, Pa.			REGISTER NO. WARD NO.

NARRATIVE SUMMARY
Standard Form 502
502-107-02

REPORT OF MEDICAL EXAMINATION

88-117

1. NAME—FIRST NAME—MIDDLE NAME—LAST NAME MUZA, Louis Steve			2. GRADE AND COMPONENT OR POSITION SFC RA		3. IDENTIFICATION NO. 199-24-8927		
4. HOME ADDRESS (Number, street or RFD, city or town, State and ZIP Code) R.D. #1, Box 123-B Etters, Pennsylvania 17319			5. PURPOSE OF EXAMINATION Medical Board		6. DATE OF EXAMINATION 21 May 71		
7. SEX Male		8. RACE Cau		9. TOTAL YEARS GOVERNMENT SERVICE MILITARY 18 6/12 CIVILIAN		10. AGENCY U.S. Army	
11. ORGANIZATION UNIT MHC, VFGH, Phoenixville, Pa.		12. DATE OF BIRTH 27 Feb 31		13. PLACE OF BIRTH York County, Pennsylvania		14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN Mrs. Sylvia M. Muza (W) Same as #4	
15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS Valley Forge General Hospital, Phoenixville, Pa.			16. OTHER INFORMATION				
17. RATING OR SPECIALTY 63Z5H			TIME IN THIS CAPACITY (Total)		LAST SIX MONTHS		

CLINICAL EVALUATION

NOR- MAL	(Check each item in appropriate col- umn; enter "NE" if not evaluated.)	ABNOR- MAL
X	18. HEAD, FACE, NECK AND SCALP	
X	19. NOSE	
X	20. SINUSES	
X	21. MOUTH AND THROAT	
	22. EARS—GENERAL (Int. & ext. canals) (Auditory acuity under items 70 and 71)	X
X	23. DRUMS (Perforation)	
X	24. EYES—GENERAL (Visual acuity and refraction under items 59, 60 and 61)	
X	25. OPHTHALMOSCOPIC	
X	26. PUPILS (Equality and reaction)	
X	27. OCULAR MOTILITY (Associated parallel move- ments, nystagmus)	
X	28. LUNGS AND CHEST (Include breasts)	
	29. HEART (Thrust, size, rhythm, sounds)	X
X	30. VASCULAR SYSTEM (Varicosities, etc.)	
X	31. ABDOMEN AND VISCERA (Include hernia)	
X	32. ANUS AND RECTUM (Hemorrhoids, fistulas (Females only, if indicated))	X
	33. ENDOCRINE SYSTEM	
X	34. G-U SYSTEM	
X	35. UPPER EXTREMITIES (Strength, range of motion)	
X	36. FEET	
X	37. LOWER EXTREMITIES (Except feet) (Strength, range of motion)	
X	38. SPINE, OTHER MUSCULOSKELETAL	
X	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS	
X	40. SKIN, LYMPHATICS	
	41. NEUROLOGIC (Equilibrium tests under item 72)	X
	42. PSYCHIATRIC (Specify any personality deviation)	X
	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.)

#22. Tinnitus.

#29. Arteriosclerotic cardiac disease, status post anterior myocardial infarction with anginal syndrome. AHA F/T Class II-B, to C.

#33. Hyperlipidemia, under diet therapy.

#41. Meralgia paresthetica.

#42. Anxiety reaction, mild.

(Continue in item 73)

		44. DENTAL (Place appropriate symbols, shown in examples, above or below number of upper and lower teeth.)																								
		<div> <input type="checkbox"/> VAGINAL <input type="checkbox"/> RECTAL </div>																								
		Restorable teeth				Non-restorable teeth				Missing teeth				Replaced by dentures				Fixed Partial dentures								
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20					
		$\frac{0}{32}$	$\frac{2}{31}$	$\frac{3}{30}$		$\frac{1}{32}$	$\frac{2}{31}$	$\frac{3}{30}$		$\frac{1}{32}$	$\frac{2}{31}$	$\frac{3}{30}$				$\frac{1}{32}$	$\frac{2}{31}$	$\frac{3}{30}$				$\frac{1}{32}$	$\frac{2}{31}$	$\frac{3}{30}$		

Class II

LABORATORY FINDINGS

45. URINALYSIS: A. SPECIFIC GRAVITY 1.020		46. CHEST X-RAY (Place, date, film number and result) VFGH 10 May 71	
B. ALBUMIN Negative		D. MICROSCOPIC Lt mucous, 1-3 wbc, calcium oxalate crystals	
C. SUGAR Negative		E. OTHER TESTS	
47. SEROLOGY (Specify test used and result) RPR Flocculation Non-reactive		48. EKG Abnormal	
		49. BLOOD TYPE AND RH FACTOR	