

A-27

Bill gets the works

WA
245
B493
1942



I Got Down to Bare Facts
when I saw Doc Peters.



"Bill Williams, Age, 24," he writes down. "Height, five foot nine." "Weight, 172."

Why am I here? "You want a job in this shop?" the employment manager asked me, "—you've got to have a doctor's checkup first." I tell him I need a checkup like I need a nail in the head. "Look," says the employment guy, "we got jobs *and* jobs here. Certain guys can only do certain jobs. The doctor sees that square peg guys don't get shoved into round hole jobs."

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So here I am now. The Doc took my medical history first. Followed my family tree right back to the acorns. Then—

"You Weigh Too Much, Bill," Doc says. "172? Ain't that normal?" "No such thing as 'normal'," he says. "Depends on each separate fellow's build, and age, and set up. Take off ten to fifteen pounds and you'll probably add 10 years to your life."

I Open My Mouth to ask him how come, when he says, "Say AH!"



So I open my mouth and let him have an AH! "Tonsils, O. K. Your teeth look good, gums healthy—your dentist will check them for you. Now, blow through your nose, one side at a time." I blow. Right side blows like a whistle. Left side, a dead bugle. He tilts my head back and looks at something

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upstairs. "And I see your sinus is slightly inflamed. That—plus a blocked left nostril—builds the odds on your catching cold." "Ain't that normal?" "It definitely is *not* normal. You can avoid colds, if you're careful." Oh, I says. Who knows better, me or him? So I don't argue.

"Can You Hear This?" he asks me holding up a big watch. "Sure. One, two, three . . ." Well, my ears are okay—for hearing. But when he looks



inside with a special flashlight gadget, he tells me my left ear has some wax packed down inside. "Nothing serious. I'll take it out before it turns into an earache." And he does—without usin' T. N. T.

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"Cover Your Left Eye." I read this eye test chart back in school, so it's easy . . .

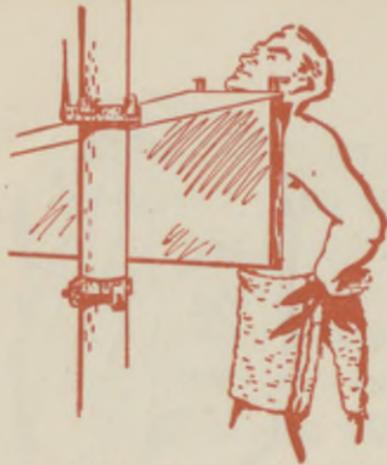
T-P-E-O-L . . .

Left eye, O. K. "Cover your right eye." **B-T-C . . .** Right eye, O. K. "Left eye, 20-20. Right, 20-20. That means you can read figures a little less than a half-inch high at a twenty-foot distance. You don't have to worry about handling a job with close, small work."



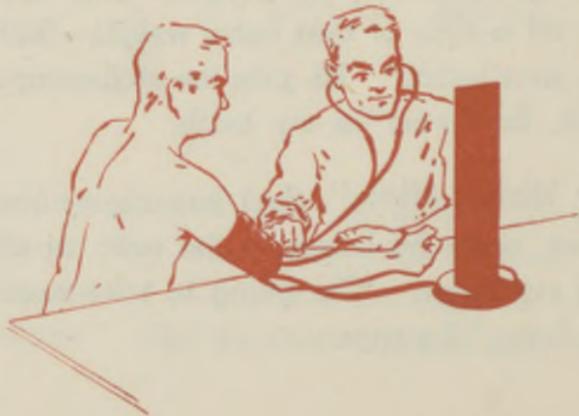
He Puts a Stethoscope over my heart in different places. "You've got a good pump there," he says. "No leaks, no rattles, no gurgles. Just remember to take off a little of that extra weight—that extra load on your heart." He puts the stethoscope near my neck, then over on my back.

"Say Ninety-Nine." So I say ninety-nine over and over, while he listens to the echo at different ends of my lungs. "I'm going to take some chest X-rays, later," he says.



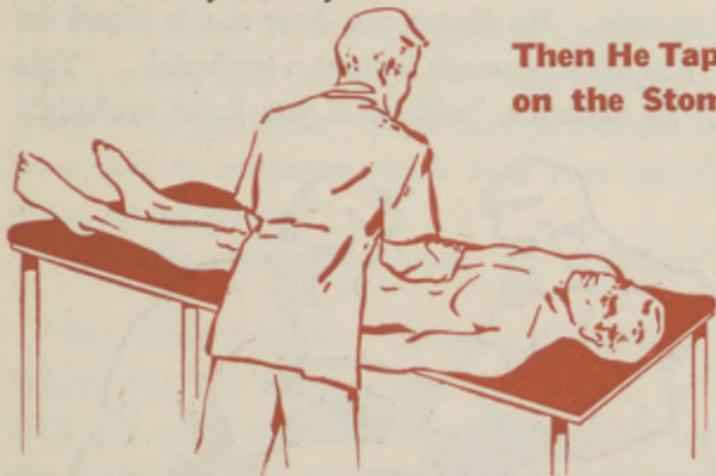
That hits me. "Hey," I croak, "don't tell me—T. B.?" "No, no," he laughs. "But how can I see your lungs without a picture? Chest X-ray gives me that double check."

"How's Your Blood Pressure?" He wraps what looks like a silk stocking around my arm, and starts pumping air into it. "When this blows up to a certain air pressure," he explains (I guess I'm looking worried . . .) "it will squeeze your arm just tight enough to stop the blood for a second. That's your top blood pressure." "How'm I doin'?" I want to know. "Fine. 128. That's normal for



your particular height, weight, and build." He lets the air out of this baby tire tube on my arm, and writes: Systolic blood pressure, 128. Diastolic, 82. "Dia—what?"

"Look," he says, "your heart is a pump. It does enough work in a day to lift a ten-ton truck five feet. It squeezes blood through your system, and we call the squeeze 'systolic' blood pressure. It relaxes for a second right after each squeeze, and that's 'diastolic' pressure. Got it?" Not exactly, but I nod my head yes.



**Then He Taps Me
on the Stomach.**

"Get stomach aches?" "Only when I do something wrong. Like eatin' too much." "Well," he

smiles, "that's all right. Stand up. Cough." I give him a cough from the boots up. No rupture, he writes. "Your muscles are strong. If you watch yourself—and take some of that extra weight off your heart—you don't have to be afraid to do heavy work," he tells me. "Now sit down." Then he raps me below the kneecap with a little rubber hammer. My foot jumps. Automatic. "Reflexes, O. K."

So Far, So Good. Then the Doc taps me with a needle inside the elbow. He strikes oil and takes a blood sample. He shows me how much blood he took. Just about enough to float a toothpick. "This blood," he explains, "will tell if you have syphilis."



He also takes a few drops from my finger. "We'll see if your blood-color is red and rich enough. We'll count the red blood cells to see if enough oxygen is reaching your lungs and muscles. We'll count the white blood cells to see if you're prepared to fight germ invasions. Wonderful stuff, blood." And that's no lie, I think.

Then I give him a urine sample. This, he says while I start to dress, tells him if I have diabetes, or any kidney trouble.

"It's a Good Thing You Got a Checkup before taking a job, Bill," says Doc. "This medical record gives us a yardstick. Next time you come in, it'll be easier to measure which way your health has gone, up or down."

"What do you mean," I ask, "by 'next time'?"

"We Give Regular, Periodic Checkups here. Why? For the same reason you check up regularly on your car. Fellows who wouldn't run a car without oil, go around hitting on only two cylinders themselves. They don't know they're losing power. First thing, they're sick. Lost time, lost

pay checks. They need periodic examinations. If you *think* you're healthy, and the checkup proves you're right, you *know* you are. If you need medical care—or if some hazard on the job is affecting your health—the checkup will show what's wrong. Then you can catch it quick." (You said a mouthful, Doc, I think to myself . . .)

"You're lucky," continues Doc, "this shop is up-to-date. We have *engineered* safety in the shop; we have *medical* safety in here to match it. Safety machinery can break down, so we check it. We'll give you regular checkups, also, to make sure none of the chemicals, gases, or dust on the job get you down before you yourself can detect what's happening."

"How about the fellows who don't have doctors in their shops?" I ask. "They can see their family doctor, or the union doctor. No matter where you get it, a checkup is good health insurance. That's why you were smart to come in here and cooperate, Bill."

Maybe he isn't wrong, at that! I'm not Einstein, but now when it comes to knowin' where I stand, I'm not so dumb!

Workers' Health Series

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