

NEW YORK STATE  
DEPARTMENT OF HEALTH  
**CERTIFICATE  
OF DEATH**

STAIR 1 HJ. NUMD.11



RECORDED DISTRICT  
**2201**  
REGISTER NUMBER  
**431**

RESIDENCE \*

NCHS

4C

4G

7A

7B

9

10

8I

25

30

31

31B

QR

QS

GOOD

CANCER

1. NAME: FIRST <b>Lawrence</b>			MIDDLE <b>G.</b>			LAST <b>Malbeuf</b>			2. SEX: MALE <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/>		3A. DATE OF DEATH: MONTH <b>09</b> DAY <b>06</b> YEAR <b>95</b>			3B. HOUR: <b>5:15 a. m.</b>															
4A. PLACE OF DEATH: (Check only one) HOSPITAL DOA <input type="checkbox"/> HOSPITAL ER <input type="checkbox"/> HOSPITAL OUTPATIENT <input type="checkbox"/> HOSPITAL INPATIENT <input checked="" type="checkbox"/> NURSING HOME <input type="checkbox"/> PRIVATE RESIDENCE <input type="checkbox"/> OTHER (Specify) _____			4B. IF FACILITY, DATE ADMITTED: MONTH <b>09</b> DAY <b>05</b> YEAR <b>95</b>			4C. NAME OF FACILITY: (If not facility give address) <b>Samaritan Medical Center</b>			4D. LOCALITY: (Check one and specify) CITY OF <input type="checkbox"/> VILLAGE OF <input type="checkbox"/> TOWN OF <input checked="" type="checkbox"/> <b>Watertown</b>			4E. COUNTY OF DEATH: <b>Jefferson</b>																	
4F. MEDICAL RECORD NO. <b>272431</b>			4G. WAS DECEDENT TRANSFERRED FROM ANOTHER INSTITUTION? (If yes, specify institution name, city or town, county and state) NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>			5. DATE OF BIRTH: MONTH <b>Feb.</b> DAY <b>14</b> YEAR <b>1931</b>			6. AGE: <b>64</b> yrs.			7A. CITY AND STATE OF BIRTH: (County if not U.S.A.) <b>Lewisburg, New York</b>			7B. IF AGE UNDER 1 YEAR, NAME OF HOSPITAL OF BIRTH:														
8. SERVED IN U.S. ARMED FORCES? NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> (Specify years) <b>1950-54</b>			9. RACE: (Black, White, etc.) <b>White</b>			10. HISPANIC ORIGIN? (If yes, specify) NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>			11. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) <b>12</b> College (1-4 or 5)			12. SOCIAL SECURITY NUMBER: <b>072 24 1737</b>			13. MARITAL STATUS: NEVER MARRIED <input type="checkbox"/> MARRIED OR SEPARATED <input checked="" type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/>			14. SURVIVING SPOUSE: (If wife, provide maiden name) <b>Evelyn Peck</b>											
15A. USUAL OCCUPATION: (Do not enter retired) <b>Laboratory Supervisor</b>			15B. KIND OF BUSINESS OR INDUSTRY: <b>Mining</b>			15C. NAME AND LOCALITY OF COMPANY OR FIRM: <b>Gouverneur Talc, Gouverneur, NY</b>			16A. RESIDENCE, STATE: <b>New York</b>			16B. COUNTY: <b>Lewis</b>			16C. LOCALITY: (Check one and specify) CITY OF <input type="checkbox"/> VILLAGE OF <input type="checkbox"/> TOWN OF <input checked="" type="checkbox"/> <b>Diana</b>			16F. IF CITY OR VILLAGE IS RESIDENCE WITHIN CITY OR VILLAGE LIMITS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> IF NO, SPECIFY TOWN:											
16D. STREET AND NUMBER OF RESIDENCE: <b>North Shore Road - Lake Bonaparte</b>			16E. ZIP CODE: <b>13648</b>			16G. ZIP CODE: <b>Diana</b>			17. NAME OF FATHER: FIRST <b>Nelson</b> MI <b>Malbeuf</b> LAST <b>Malbeuf</b>			18. MAIDEN NAME OF MOTHER: FIRST <b>Anna</b> MI <b>McIntyre</b> LAST <b>McIntyre</b>			18A. NAME OF INFORMANT: <b>Evelyn Malbeuf</b>			18B. MAILING ADDRESS: (Include zip code) <b>P.O. Box 143 Harrisville, New York 13648</b>											
20A. BURIAL, CREMATION, REMOVAL OR OTHER DISPOSITION: (Specify) <b>Burial</b>			20B. PLACE OF BURIAL, CREMATION, REMOVAL OR OTHER DISPOSITION: MONTH <b>Sept</b> DAY <b>9</b> YEAR <b>1995</b> <b>Hillside Cemetery</b>			20C. LOCATION: (City or town and state) <b>Natural Bridge, New York</b>			21A. NAME AND ADDRESS OF FUNERAL HOME: <b>Bossuot Lundy Funeral Home 500 State St. Carthage, New York 13619</b>			21B. REGISTRATION NUMBER: <b>00195</b>			22A. NAME OF FUNERAL DIRECTOR: <b>Samuel P. Lundy</b>			22B. SIGNATURE OF FUNERAL DIRECTOR: <i>Samuel P. Lundy</i>			22C. REGISTRATION NUMBER: <b>03038</b>								
23A. SIGNATURE OF REGISTRAR: <i>Thomas M. Hunter</i>			23B. DATE FILED: MONTH <b>9</b> DAY <b>7</b> YEAR <b>95</b>			24A. BURIAL OR REMOVAL PERMIT ISSUED BY: <i>Anna M. Hunter</i>			24B. DATE ISSUED: MONTH <b>9</b> DAY <b>7</b> YEAR <b>95</b>			25A. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO THE CAUSES STATED. SIGNATURE: <i>Charles Romero</i> MONTH <b>9</b> DAY <b>6</b> YEAR <b>95</b>			25B. THE PHYSICIAN ATTENDED THE DECEASED FROM <b>7/19/94</b> TO <b>9/6/95</b>			25C. NAME OF ATTENDING PHYSICIAN: <b>Charles Romero</b>			25D. ATTENDING PHYSICIAN LICENSE NUMBER: <b>1429</b>			25E. SIGNATURE OF CORONER OR CORONER'S PHYSICIAN, IF OTHER THAN CERTIFIER: <i>Charles Romero</i>			25F. MEICOR PHYS. LICENSE NUMBER: <b>1429</b>		
26. NAME AND ADDRESS OF CERTIFIER WHO SIGNED 25A: <b>826 Washington St. Watertown NY 13601</b>			27. MANNER OF DEATH: NATURAL CAUSE <input checked="" type="checkbox"/> ACCIDENT <input type="checkbox"/> HOMICIDE <input type="checkbox"/> SUICIDE <input type="checkbox"/> UNDETERMINED CIRCUMSTANCES <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/>			28. WAS CASE REFERRED TO CORONER OR MEDICAL EXAMINER? NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>			29. AUTOPSY? NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>			30. IF YES, WERE FINDINGS USED TO DETERMINE CAUSE OF DEATH? NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>			31. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR (A), (B), AND (C)) PART I. IMMEDIATE CAUSE: (A) <b>Mediasteloma, Thoracic, @</b>			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH: <b>14 mos</b>											
31A. IF INJURY, DATE: MONTH <b>9</b> DAY <b>6</b> YEAR <b>95</b>			31B. LOCALITY: (City or town and county and state) <b>Watertown, NY</b>			31C. DESCRIBE HOW INJURY OCCURRED:			32. PLACE OF INJURY: NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>			32. WAS DECEDENT HOSPITALIZED IN LAST 2 MONTHS? NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>			33A. IF FEMALE, WAS DECEDENT PREGNANT IN LAST 6 MONTHS? NO <input type="checkbox"/> YES <input checked="" type="checkbox"/>			33B. DATE OF DELIVERY: MONTH <b>9</b> DAY <b>6</b> YEAR <b>95</b>											

For use by physicians or institutions  
NAME OF DECEDENT:  
TIME OF DEATH:  
AM  
PM

GOUVERNEUR TALC CO., ( C.  
GOUVERNEUR, NEW YORK



RECORD OF JOBS HELD

NAME MALBEUF, Lawrence George

Date of Hire 8/4/54

DATE		JOB CLASSIFICATION	DEPT.
From	To		
8/4/54	9/2/54	Laborer	Mill
9/3/54	10/24/54	1st Miller (SC)	Mill
10/25/54	1/16/55	2nd Miller	Mill
1/17/55	8/31/70	Quality Control	Mill
9/1/70	3/1/94	Supervisor Quality Control	Mill

Early retirement, age 63, under Pension Plan DA-325.

Empty table rows for additional job records.

SAMARITAN MEDICAL CENTER  
ONCOLOGY UNIT  
830 WASHINGTON STREET  
WATERTOWN, N.Y. 13601

July 28, 1994

Dr. Ashraf  
West St. Rd.  
Carthage, NY 13619

Dear Dr. Ashraf:

Thank you for asking me to see Mr. Malbeuf who was seen in our office July 19th. He is a pleasant 63 year old man who was diagnosed in Syracuse as having a right sided malignant mesothelioma status post thoracoscopy and chest tube drainage with sclerosis. He presented by virtue of shortness of breath over a 2-3 week period and had had a thoracentesis X 2 in June of this year. Currently there is no significant shortness of breath. He notes marked improvement in his sense of well being since the pleurodesis. In addition, there is no chest pain or hemoptysis. He denies fevers, chills or night sweats. No abdominal discomfort, focal weakness, numbness, paresthesias or bone pain. He denies significant weight loss, loss in appetite or energy. There are no urinary symptoms.

In addition, he was recently diagnosed April of 1994 with prostate cancer, I believe stage B. Radiation therapy being recommended by Dr. Plumpton. PSA level was 9.7.

He has a 45 one pack year history of smoking. He does not abuse alcohol. He has no known allergies. Medications are Zantac, Atenolol and Buspar.

Past medical history includes hypertension in the past, midepigastic pain for which he has taken Zantac. He's been admitted to St. Joe's in Carthage this year, related to his mesothelioma. There has been no other significant hospitalizations or surgery other than appendectomy or medical problems. There is no other prior history of cancer.

Social history and family history includes four children. He is accompanied today by his wife. He is retired. He has had exposure to industrial dusts. He has a "border line positive PPD".

Exam revealed an alert, healthy appearing man weighing 167 lbs. Pulse is 84 and regular. HEENT exam showed no icterus. Extraocular muscles are intact. Pupils are equal. Disks are not examined. There is no pain on percussion over the spine, no adenopathy, no palpable thyroid. No skin nodules, joint swelling or clubbing. Chest shows a few rales at the right base. The left lung is clear. There is a regular rate and rhythm without murmur, gallop, rub or pedal edema. There is a healed right chest tube scar. The abdomen is soft, nontender without organomegaly or masses. Prostate and testicles were not examined. Gait is of normal cadence.

Laboratories include thoracoscopy performed at St. Joseph's 6/8/94 showed that the entire pleura was abnormal, thickened and inflamed with multiple nodularities. There was also involvement of the visceral pleura of the lung. Chest x-ray reviewed originally showed a right pleural effusion 3/4 up the hemithorax.

IMPRESSION:

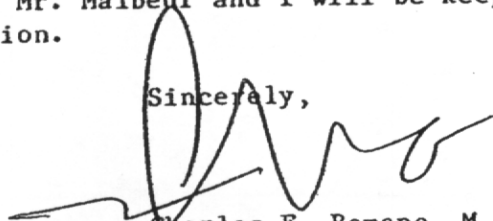
1. Malignant mesothelioma by biopsy, right chest, asymptomatic, status post chest tube drainage and pleurodesis.
2. Well differentiated prostatic carcinoma, at least stage B.

A discussion was held regarding the natural history of mesothelioma. I offered the patient a range of options from very aggressive therapy for which he might have to be seen at a center such as Memorial to chemotherapy to observation. The pros and cons of each approach, in light of the natural history of this disease was explained. For the time being, since he is asymptomatic and since there is no good chemotherapy nor has radiation or surgery shown to impact positively the natural history of this disease, only observation is warranted. In my opinion he has had the main treatment that is drainage and sclerosis to improve his sense of well being and performance status.

Regarding the prostate, given the history of mesothelioma I do not think radiation or surgery would be indicated. If he start to have difficulty from the prostate then treatment with hormones or antagonists can be used. He has a return visit in 2 months.

Thank you for asking me to see Mr. Malbeuf and I will be keeping you and Dr. Sherman informed of his situation.

Sincerely,

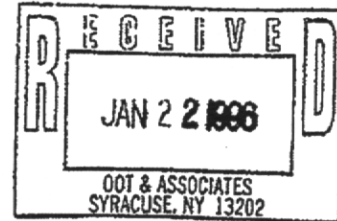


Charles F. Romano, M.D.  
Department of Oncology

D 7/28/94  
T 7/29/94 VA  
cc: Dr. Sherman

Ronald A. Miller, M.D.  
961 Canal Street  
Syracuse, New York 13210-1287

January 18, 1996



Thaddeus B. Oot, Esq.  
Oot & Associates  
503 E. Washington Street  
Syracuse, NY 13202

Re: Evelyn L. Malbeuf (Widow)  
Lawrence Malbeuf (Deceased) vs  
Gouverneur Talc  
D/D: 9/6/95  
D/A: 3/1/94  
WCB#: 69409937  
CC#: 40135972-062

Dear Mr. Oot:

I have reviewed the submitted material relative to this gentleman which material includes the following:

1. There is included a transcribed report of workman's compensation board hearing before Judge Francis LaVigne of 2/95. The Judge determined occupational lung disease - pneumoconiosis. The claimant was classified as permanently and totally disabled.
2. A death certificate signed by Dr. Charles Romano of Watertown, New York, indicating the diagnosis of mesothelioma - thoracic. The date of expiration noted as 9/6/95.
3. A pulmonary consultation report dated 4/1/94 by Dr. Sherif G. El Bayadi. The doctor's impression was as follows: "Large right pleural effusion with suspicious cytology but not diagnostic for adenocarcinoma." The doctor indicated that mesothelioma should be considered in the differential diagnosis noting the CAT Scan suggested pleural thickening with calcification consistent with asbestos exposure. Also noted at that time was an elevation of the PSA with a value of 9.7.
4. Also reviewed was an extensive consultative records review by Dr. W. K. C. Morgan, an internationally recognized expert and author regarding pulmonary disease. In the doctor's review of radiographic examinations by several radiologists, Dr. Morgan noted no radiographic evidence

...continued

1300  
MOBAY



Page 2

Re: Lawrence Malbeuf vs. Gouverneur Talc

for pneumoconiosis but does specifically refer to a CAT Scan of 3/25/94 reported by Dr. Lanigan of Carthage, New York, in which study there were patchy alveolar infiltrates in the right middle lobe and superior segment of the right lower lobe. In addition, there was a 6 mm nodular density in the lateral aspect of the right middle lobe. The significance of these observations was not certain, but the nodular density that was suggested could represent a carcinoma.

In spite of his uncertainty regarding the parenchymal involvement regarding fibrosis, because of the very significant change in Mr. Malbeuf's lung function, Dr. W. K. C. Morgan concluded that "There is no better explanation than pulmonary fibrosis, i.e. pneumoconiosis."

In reviewing the submitted material including the history of many years of exposure to talc dust often known to be contaminated with asbestos, the history of pleural thickening, large pleural effusion, and report of pleural biopsy of St. Joseph's Hospital admission of 6/3/94 demonstrating malignant mesothelioma with calcified pleural plaque and pulmonary ferruginous bodies, my diagnosis with a reasonable degree of medical certainty is that of mesothelioma.

I should be answer to questions should they arise. Thank you for the opportunity of reviewing these records.

Sincerely,



Ronald A. Miller, M.D.

RAM/cif

T 30 00  
MOB 2 18

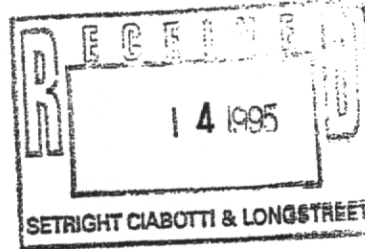


State University of New York  
Health Science Center  
Syracuse

College of Medicine

Department of Pathology  
(315) 464-4750  
FAX (315) 464-7130

2-56



June 12, 1995

Victor J. Ciabotti  
Setright and Ciabotti  
313 Montgomery Street  
Syracuse, NY 13202

Re: Lawrence Malbeuf, JA95-106

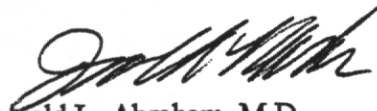
Dear Mr. Ciabotti:

I received one slide labeled "A" from St. Joseph's Hospital in Syracuse. I also received a copy of a February 1, 1995 report from Dr. Keith Morgan, and a copy of the pathology report from St. Joseph's Hospital and a consultation report from Dr. Katzenstein. According to Dr. Katzenstein's report, there were 49 slides received for review of the total case. Therefore my review at this point is limited to one slide.

The one slide I received contains both tumor with epithelial pattern typical of malignant mesothelioma and sample of lung parenchyma showing considerable accumulation of mixed strongly birefringent and more weakly birefringent dust and a few ferruginous bodies consistent with asbestos bodies. The report from Dr. Katzenstein states that the tumor showed positive staining for cytokeratin and negative staining for mucin as well as negative staining for CEA, B72.3 and Leu M1. These findings all support the diagnosis of malignant mesothelioma with epithelial pattern.

For me to fully review this case I would greatly appreciate if you would ask St. Joseph's Hospital to send me a few of the paraffin blocks containing tumor and lung so that I could more fully study this case.

Sincerely,

  
Jeffrold L. Abraham, M.D.  
Professor of Pathology  
Professor of Preventive Medicine  
Director of Environmental and  
Occupational Pathology

JLA/cd

Committed to Excellence in Professional Education, Patient Care and Research.

College of Medicine

College of Graduate Studies

College of Health Related Professions

College of Nursing

University Hospital

750 East Adams Street, Syracuse, N.Y. 13210



**R. T. Vanderbilt Company, Inc.**  
INDUSTRIAL MINERALS AND CHEMICALS

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FAX (203) 853-1452 • CABLE "BILTVAN", NORWALK, CONNECTICUT • TWX 710-468-2940

April 3, 1995

Mirza M. Ashraf, M.D.  
1001 West Street  
Carthage, NY 13619

Re: Mr. Lawrence Malbeuf SS# 072-24-1737

Dear Dr. Ashraf:

Attached please find our original correspondence to you and a medical release authorization concerning Mr. Malbeuf. In response to this request you did forward assorted medical summaries and reports we are most grateful to have received. Unfortunately we have not yet received some detailed laboratory reports and all radiographs and tissue specimens referenced in some of these documents.

As a follow-up to our original request, we are again requesting these materials. If you do not have such records and specimens, we would appreciate any advice you might provide as to where such material might be found. Clearly, it is not possible for our medical consultants to properly complete their review without access to such key diagnostic records and specimens.

In addition to Dr. Boehlecke (mentioned in our earlier correspondence), we have retained another pulmonary specialist, Dr. Keith Morgan. We would like the detailed laboratory reports, pertinent chest radiographs and tissue specimens associated with Mr. Malbeuf's pulmonary condition sent to Dr. Morgan (see address and phone below).

We would be happy to formally assure the security and return of these records and specimens to you after our review. If you have reservations in this regard, please contact me or Dr. Morgan directly. We would like to complete our review of this case as soon as possible and appreciate your cooperation on this matter.

Very truly yours,

R. T. VANDERBILT COMPANY, INC.

John W. Kelse  
Corporate Industrial Hygienist  
Manager, Occupational Health & Safety

Please forward additional records and specimens to:

W.K.C. Morgan, M.D.  
FRCP (Ed), FRCP (c), FACP  
University Hospital, Chest Diseases Unit  
338 Windermere Road  
London, Ontario N6A 5A5 Canada  
Phone: 519-663-3806 Fax: 519-663-3232





# R. T. Vanderbilt Company, Inc.

INDUSTRIAL MINERALS AND CHEMICALS

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FAX (203) 853-1452 • CABLE "BILTVAN", NORWALK, CONNECTICUT • TWX 710-468-2940

October 4, 1994

Carthage Area Hospital  
Medical Records Department  
1001 West Street  
Carthage, NY 13619

Re: Mr. Lawrence Malbeuf SS# 072-24-1737

Dear Sir or Madam:

As his former employer we have contacted Mr. Malbeuf and received his permission to access his medical records. A copy of the records release is attached. For many years the Gouverneur Talc Company has maintained an active medical surveillance program. Over the last ten years we have coordinated this program through a pulmonary specialist at The University of North Carolina at Chapel Hill.

The company is aware that overexposure to its talc dust - indeed any mineral dust - can result in adverse pulmonary effects. We are therefore concerned about reports we have received about Mr. Malbeuf's pulmonary condition, wish to be informed on this condition and to assist in any way we can. On behalf of all our talc miners and millers we feel we have a commitment to do so.

It is our hope to obtain a copy of Mr. Malbeuf's medical record along with available tissue samples for review by Brian Boehlecke, M.D. (our pulmonary medical advisor) and a pathologist familiar with histology possibly associated with this case. Whatever is learned from this review will certainly be shared with you, Mr. Malbeuf or any additional parties Mr. Malbeuf might later designate. Mr. Malbeuf was a patient at the hospital from 3/22/94 to 3/26/94.

If you could provide a copy of Mr. Malbeuf's medical record pertaining to his pulmonary status and any related tissue samples available, we would be most grateful. Please forward this material to my attention. Please feel free to contact Dr. Boehlecke at 919-966-2532 or me at 203-853-1400 if we can clarify this request or help in any other way.

Very truly yours,

R. T. VANDERBILT COMPANY, INC.

John W. Kelse  
Corporate Industrial Hygienist  
Manager, Occupational Health & Safety

*Smart*  
*10/24/94*  
*46*

FWK/sk  
attachment

cc: Mr. Lawrence Malbeuf  
Brian Boehlecke, M.D.  
Mr. Dana Putman

MEDICAL RELEASE AUTHORIZATION

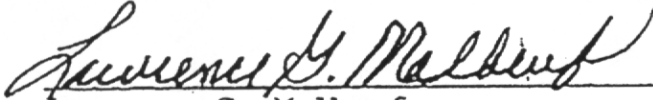
TO: \_\_\_\_\_

I hereby authorize my primary care physician, all other persons who have medically evaluated or attended me (to include hospital facilities) to permit examination and reproduction of all or any portion of the following by the R.T. Vanderbilt Company, Inc., or its authorized representatives:

All medical records, pulmonary evaluations (to include x-rays, x-ray interpretation reports), laboratory records and reports, tissue samples and all tests of any type and character pertaining to my current pulmonary condition treatment, diagnosis, prognosis or etiology.

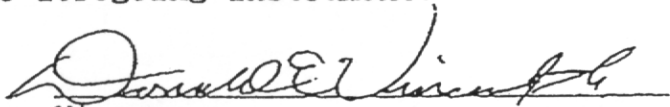
A photostatted copy of this authorization shall have the same effect as the original.

The undersigned authorizes the R.T. Vanderbilt Company, Inc., to redisclose any and all records obtained pursuant to this authorization to its counsel or individuals or organizations retained as medical experts to act on its behalf.

  
Lawrence G. Malbeuf  
Social Security# 072 24 1737

WITNESSED:

On the 3<sup>rd</sup> day of October 1994, before me personally appeared Mr. Lawrence G. Malbeuf, known to be the individual described in and who executed the foregoing instrument.

  
Witness

NOTE: This authorization shall be considered invalid after 90 days of the above date signed. If presented after that time, obtain a new authorization.