REPORT OF PHYSICAL EXAMINATION

Purpose of this examination APPOINTMENT as Lt-C 1-V	(S) USNR. Date of examination 5-21-40
Place of duty	Place of examination Reserve Armory, Ny. Yd. Wash. D.
Name JOHNSON, Lyndon Baines	
(Sumaine mist, Omristian names in fun)	Date of birth 8-27-08
Family history Father died in 1937. Mother	The case of the ca
利用以下200 生物以及基础。到的数	Carrier Market Permission of Telescope Section
History of illness or injury Usual diseases of d	
Head and face Normal	
Eyes: Pupils (size, shape, reaction to light and distance, etc.	Equal. React to light and accomodation
Distant vision Rt. 20-1 /20, corrected to	
Lt	/20 by
Binocular vision(Without lenses—Recorded only when visual defects exis	Color perceptionNormal
(Without lenses—Recorded only when visual defects exis Disease or anatomical defects	f. The form of the first of the
	Whispered voice/15' Spoken voice/15'
	Whispered voice
Nose Normal	ninemisch antinal
(Disease or anatomica	defect, obstruction, etc. State degree)
Tongue, palate, pharynx, larynx, tonsils	
Teeth and gums (disease or anatomical defect): Dental	ly qualified
Dental treatment urgentYes	
Prosthetic treatment needed	Indicate previous work in red, present condition in black. Mark missing teeth by X whether replaced or not. Show caries, crowns, bridgework, plates, etc.
Gingival diseaseNo	MANATAR MAHAMAMANTATAR
	BEECOCOLULUCO EDE
Nonvital teeth (List numbers) No	
Missing teeth # 16-19-32	6 2 3 4 5 6 7 8 9 10 11 12 13 14 15 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19
(List numbers)	
Periapical disease	
ParadentosisNo	17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32
raradentosis	Character of pulse Fight from Tespecor.
	slender, medium, or heavy, and postural abnormalities)
Where oxereing 1	THE PARTY OF THE P
reight Chest at inspiration	Pigod Presenter Delore 38 Santa 2 2
	abdomen at umbilicus
Heart (note all aigns of cardiac involvement)	1000
Committee and State of the Committee of	
reck (abhormanties, thyroid gland, trachea, laryhx)	
Spine and extremities (bones, joints, muscles, feet)	

4-7081

Thorax (size, shape, movement, rib cage, mediastinum)	Normal			
Respiratory system, bronchi, lungs, pleura, etc.	Normal			
Spine and extramities (bones, joints, rauscles, feet)	*			
Cardio-vascular system	Normal			
Heart (note all signs of cardiac involvement)	Normal			
Recent gate or loss amount and course				
Pulse: Before exercise 30	Blood pressure: Before, S 118 , D 80			
After exercise 98	Three minutes after S 122 D 80			
Three minutes after 82	(Manual of the Modical Department par. 1520(6))			
Governational and appearance	Character of pulse Full and regular			
Farming of arctics	Hemorrhoids None			
Condition of veing				
Abdomen and pelvis (condition of wall, scars, herniae, abnorr	nality of viscera)			
Misoing teeth Action (Control of the Control of the	B Later Commence to the second is			
Absessa or fishala.	- PULLULANDEM ABOUT TO THE			
Genito-urinary systemNormal	Wantima			
amiliant modern	, sugar Negative , microscopical			
Venereal diseaseNone	AND AND ADDRESS OF THE PROPERTY OF THE PROPERT			
Nervous system Normal	organic or functional disorders)			
A STATE OF THE PARTY OF THE PAR	Incoordination (gait, speech)None			
Romberg Negative Reflexes, superficial Normal , deep (knee, an	· · · · · · · · · · · · · · · · · · ·			
Serological tests (when required)				
Abnormal psyche (neurasthenia, psychasthenia, depress	ion, instability, worries)			
tarscass of angrounds, defects				
the Water 40 Conn the A	(Number of courses None			
Smallpox vaccination Date last vaccination None	Typhoid prophylaxis {			
(Reaction	Date of last course			
Remarks on abnormalities not otherwise noted or sufficiently	described above Rone			
DA. CULTUCIED VO.	Commission of the commission o			
Summary of defects None	250 083			
TOTAL THE STATE AND ASSESSED AND ASSESSED ASSESSED ASSESSED AS A STATE OF THE STATE				
Is the individual fit to perform active duty at sea or on foreig	n service? (If not, state limit of duty)Yes			
Findings and recommendations (as per Courts and Boards, when necessary) We hereby certify that				
Mr. Lyndon Baines JOHNSON IS physically qu	alified for appointment as Lt-C.1-V(S)USNR.			
Accept the second secon	C. W. SMITH, Commander (MC) USN. (Retired)			
MEMBERS STATUTORY MOARD	W. E. KLEIN, Lieutenant (MC) USN.			
OF MEDICAL EXAMINERS	L. B. HARPER, Lieutenant (ig) (MC) USN.			
	HERE AND ADDRESS OF THE PARTY O			
Remarks or endorsement	LIEUS DI STEINFRIED TALE DE CONTRACTOR DE CO			

INSTRUCTIONS: Be definite in statement and specific in recommendation. All abnormal conditions shall be given diagnostic titles as listed in Navy Nomenclature. The original only shall be forwarded direct to the Bureau of Medicine and Surgery except in cases of personnel of the Naval Reserve when the original and one copy shall be forwarded via the Commandant. Regarding preliminary examinations for the Naval Academy, see paragraph 1403, and for color perception, paragraph 1428, Manual of the Medical Department, U. S. Navy. The spoken voice (ordinary conversation) shall be recorded in all cases of defective hearing. In recording vision, the numerator of the fraction shall be the distance at which Snellen's 20-foot test letters can be determined and the denominator, 20.



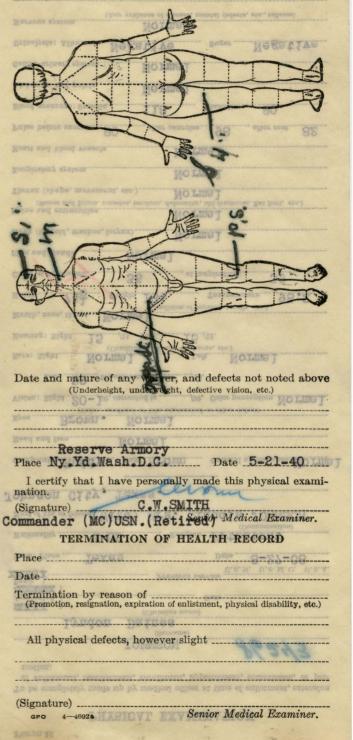
PHYSICAL EXAMINATION

To be completely made up by medical officer at time of enlistment, extension of enlistment, reenlistment, enrollment, appointment, commission, or promotion.

motion.
JOHNSON 86243
Lyndon Baines
(Christian name)
Appointed Date Rank Previous service
U.S.N. U.S.M.C. U.S.A.
Born: Place Texas Date 8-27-08
Nationality W-US Religion Priestant (Denomination)
Next of kin or friend (Wife) Mrs. Claudia JOHNSON
Johnson City, Texas.
I certify that I have personally made this physical exami-
Complexion Ruddy Hair Brown General appearance Norma
Head and face Normal
Eves Brown. Normal
(Color, condition of lide, anatomical or other defect) Vision: Right 20 - 20, corrected to
Left 2Q _/20, corrected to/20.
Ears: Right Normal Left Normal (Condition of drum, discharge, etc.)
Hearing: Right 15 /15, Left 15 /15.
Mouth, nose, throat Normal (Condition of septum, tonsils, etc.)
Height 742 Weight 184 Temperature 98.2
Chest at expiration 36 , at inspiration 39
Skin and glands Normal
Neck (thyroid, trachea, larynx) Normal
272
(Bones and joints, muscles, tendons, deformity, old fractures, flat foot, etc.)
Thorax (shape, movement, etc.) Normal
Respiratory system Normal
Heart and blood vessels Normal
Pulse before exercise 80 , after exercise 98 , after rest 82
Blood pressure: Systolic 118 Diastolic 80
Abdomen and pelvis Normal
Abdomen and postal
To a series of the series of t
Urinalysis: Albumen Negative Sugar Negative
Nervous system (Any evidence of disease, mental defects, etc., reflexes)
quently is black ink, with date,

MARKS, SCARS, ETC.

Enter original findings in red ink, those acquired subsequently in black ink, with date.





CEPORT OF PHYSICAL EXAMINATION NOW

Purpose of this examination For Active Duty	Date of examination 12-10-41
Place of duty	
Name Johnson, Lyndon Baines (Surname first, Christian names in full)	Rank Lt. Comdr. I-V(S) Corps USNR
Place of birth Stonewall, Texas	Date of birth Aug. 27, 1908
Family history Negative	
	The second of th
History of illness or injury Appendectomy 1937. Ton	sillectomy 1941. Date
	1941 DEC 12
THE RESERVED TO SERVED THE PER COURT AND JOSEPH WHEN	1341010112
Head and face Normal	NT N TITLE COLUMN
) Equal, regular, react to L. & A.
	/20 by
	/20 by
Binocular vision (Without lenses—Recorded only when visual defects exist)	(State edition of Stilling's plates used)
Disease or anatomical defects None	The course of th
	Whispered voice/15' Spoken voice/15'
Lt. Watch/40" Coin click	Whispered voice/15' Spoken voice/15'
Binaural 15/15'. Disease or defects	None
(Spoken voice) Nose Deviation nasal septum. No obstra	nction
(Disease or anatomical d	efect, obstruction, etc. State degree)
Teeth and gums (disease or anatomical defect): Normal	TOTAL TERMINISTERS (PRINT SUSPEN)
Missing teeth 16 - 19 - 32 (List numbers)	Mark missing teeth by X whether replaced or not. Show size and posi-
Nonvital teeth #8 (List numbers)	Mark missing teeth by X whether replaced or not. Show size and position of caries in black, use red to indicate fillings and restorations.
(List numbers)	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16
Periapical disease No (Degree)	
Marked malocclusionNo(Yes or no)	
Lack of serviceable occlusion No (Yes or no)	
Pyorrhea alveolarisNo	"BBBBBA ARRED"
Teeth replaced by bridges None	
(List numbers) Meets dental requirements Yes	- HAMMUMMUMMANA
(Yes or no)	P1. 20 21 22 23 24 25 26 21 28 29 30 31 32
Dentures	(Signature of dental examiner)
General build and appearance Tall - erect (State whether sl	ender, medium, or heavy, and postural abnormalities)
Temperature 98.60 Chest at expiration	2011
Height $74\frac{1}{2}$ Chest at inspiration	
Weight 195 lbs. Circumference of a	bdomen at umbilicus 36"
Recent gain or loss, amount and cause None	
Skin, hair, and glands Normal. Eczema right han	nd, chronic.
Neck (abnormalities, thyroid gland, trachea, larynx)Normalities	al ·
Spine and extremities (bones, joints, muscles, feet)Normal	31

Cardio-vascular system Normal Heart (note all signs of cardiac involvement) Normal Pulse: Before exercise 84 Blood pressure: Before, S 134 , D 34 Immed. after 154 35 82 After exercise 96 Three minutes after 84 Condition of arteries Normal Condition of veins Normal Hemorrhoids None Condition of veins Normal Hemorrhoids None Abdomen and pelvis (condition of wall, scars, herniae, abnormality of viscera) Old right rectus scar. Genito-urinary system Normal Urinalysis: Sp. gr. 1.014 , alb. Negative , sugar Negative , microscopical Negative Veneral disease Normal (Organic or functional disease) Nervous system Normal (Organic or functional disease) Reflexes, superficial Normal , deep (knee, ankle, elbow) Normal Tremors None Secological tests (when required) Not indicated Abnormal psyche (neurasthenia, psychasthenia, depression, instability, worries) None Smallpox vaccination Reaction Reaction Typhoid prophylaxis Date of last course Smallpox vaccination Accident Deviation nasal septum - no obstruction. Smallpox vaccination Typhoid prophylaxis None Summary of defects Deviation nasal septum - no obstruction. Is the individual fit to perform active duty at sea or on foreign service? (If not, state limit of duty) Yes.	Thorax (size, shape, movement, rib cage, mediastinum) Normal				
Heart (note all signs of cardiac involvement) Normal Pulse: Before exercise 84 Blood pressure: Before, S 134 D 84 Immed. after S 154 D 86 Immed. after S 154 D 86 Immed. after S 154 D 86 Immed. after S 154 D 82 Immed. afte	Respiratory system, bronchi, lungs, pleura, etc. Normal				
Heart (note all signs of cardiac involvement) Normal Pulse: Before exercise 84 Blood pressure: Before, S 134 D 84 Immed after 154 JS 86 32 Three minutes after 84 Three minutes after 154 JS 86 32 Three minutes after 84 Three minutes after 154 JS 86 32 Three minutes after 154 JS 86 32 Three minutes after 154 JS 86 JS 86 Manaual of the Medical Department par. 1529(6)) Condition of arteries Normal Condition of well, scars, herniae, abnormality of viscera) None Abdomen and pelvis (condition of wall, scars, herniae, abnormality of viscera) Old right rectus scar. Genito-urinary system Normal Urinalysis: Sp. gr. 1.014 , alb. Negative , sugar Negative , microscopical Negative Veneral disease None Nervous system Normal (Organic or functional disorders) Romberg Negative Incoordination (gait, speech) None Reflexes, superficial Normal , deep (knee, ankle, elbow) Normal Tremors None Serological tests (when required) Not indicated Abnormal psyche (neurasthenia, psychasthenia, depression, instability, worries) None Smallpox vaccination Reaction Typhoid prophylaxis Number of courses Date of last course None Smallpox vaccination Abnormalities not otherwise noted or sufficiently described above None Summary of defects Deviation nasal septum - no obstruction. Singles and recommendations (as per Courts and Boards, when necessary) Physically qualified for active duty.					
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Summary of defects Deviation nasal septum - no obstruction. Is the individual fit to perform active duty at sea or on foreign service? (If not, state limit of duty) Yes Findings and recommendations (as per Courts and Boards, when necessary) Physically qualified for active duty.	Remarks on abnormalities not otherwise noted or sufficiently describe	d above None			
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active duty.	Is the individual fit to perform active duty at sea or on foreign service	e? (If not, state limit of duty) Yes			
active duty.	PORC SUID LAND				
active duty.	Findings and recommendations (as per Courts and Boards, when ne	cessary) Physically qualified for			
a principal de la constante de		esmalonusch			
I certify the above examination to be true and correct to the best of my true and correct to the best of my true. Lt. Comdr. (MC)USNR	1 40				
knowledge. C. I. Andrews, Lt. (MC) USN	knowledge.				
himdow Soliuson	A A A A A A A A A A A A A A A A A A A				
Remarks or endorsement	Commence of Commen				

INSTRUCTIONS: Be definite in statement and specific in recommendation. All abnormal conditions shall be given diagnostic titles as listed in Navy Nomenclature. The original only shall be forwarded direct to the Bureau of Medicine and Surgery except in cases of personnel of the Naval Reserve when the original and one copy shall be forwarded via the Commandant. Regarding preliminary examinations for the Naval Academy, see paragraph 1403, and for color perception, paragraph 1428, Manual of the Medical Department, U. S. Navy. The spoken voice (ordinary conversation) shall be recorded in all cases of defective hearing. In recording vision, the numerator of the fraction shall be the distance at which Suellen's 20-foot test letters can be determined and the denominator, 20.



2 Last name	3 Firs	3 First name and middle initial		
Johnson	n Lyn	don B.		
(b) 5 Grade	6 Company	7 Regiment	and Arm or Service	8 Age
Lt. Com	dr	U. S.	Nawy	33
(b) 9 Race	10 Nativity	11 Service	12 Date of admissio	
W	Texas	6/12	14 May 194	2

(b) 13 Source of admission Par 6b(5)(a) AR 40-590

14 Register numbers or hospital memoranda:

Diagnosis:

Rhinitis, Hypertrophic, acute,

Treatment:

Neo Silvo, 122 grain Codiene, Aspirin.

J. M. PARTAIN, 1st Lt. M. C.

¹⁵ Name of Hospital

 ⁽a) Fill in as: Register Index, Diagnosis Index, Disability Index, Death Index, Out-patient Index, or Venereal Report Card, as appropriate.
 (b) Spaces 5 to 13 inclusive not to be filled in when form is used for Register Index in time of peace and in the Zone of the Interior in time of war.

Form H-8 (1940) Page 1

MEDICAL HISTORY

ieut.Comdr.JOHNSON,	name)
Lyndon	
	n name(s))
Born: Place	Date

U.S. NAVAL DISPENSARY, Fan Tan #2 A 6-22-42 Diag: Pneumonia, Broncho #811. Sore throat, fever, malaise - 4 days. C.C. P.I. Pt. has been flying about the pacific area on official Nevy business, Four days ago he became ill with above complaints. Continued on duty despite the symptoms, taking sulfapyridine as prescribed by a Naval Medical Officer. On his arrival here he was examined at his hotel and sent to the New Zealand Military Hospital. No pleuritic pain some chilliness but no true chills. No G. U. symptoms. Severe frontal headache. P.E. Well developed, moderately ill manabout 40. Temp. 102.6 P.95 R. 24. B.P. 120/80. Skin - hot and moist. Few urticarial eruptions over buttocks and abdomen. Head - neg. Eyes - pupils, EOM neg. . ENT - Drums reddened and light reflex feeble, No bulging. Nasal mucus membrane red with partial obstruction. Throat diffusely reddened. Mouth - tongue neg. No Koplik's spots. Neck - few cervical nodes. Thyroid - not enlarged. Lungs coarse rhonchi both bases with few crepitant rales rt. base. No rub. Heartnot enlarged. Reg. rhythm 95 per. min. No murmurs B.P. 120/80. Abdomen - soft. non-tender. No masses. Back and extrem .neg. No clubbing tremor or cyanosis. Joints - neg. Genitalia - normal male. Reflexes - normal. Lab. - Urine neg. Blood count showed WBC 10,300 with normal differential. Course - Pt. sent to New Zealand Military Hospital, given Sulfathiazole 2 gm. stat. repeated in two hrs; then 1 gm. every

MEDICAL HISTORY

	STATE NAME OF PLACE DATE EACH NEW ENTRY
	4hrs. Symptomatic treatmentwith codeine
	ephedrine and adrenalin for the
19	urticeria. X-ray of chest showed bilaters
4-7	congestion suggestive mild broncho-
101	pneumonia. Pt. fever dropped abrupty from 104 deg.
7	to normal. Symptoms cleared rapidly and
	discharged after 4 days since it was im-
	portant that pt. leave this port on duty.
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	LT (jg) MAURICE SOKOLOW, MC-V (S) USNR.
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Purpose of this examination Release from Active duty. Date of examination 7-16-42 Place of duty Navy Department Place of examination U.S. NAVAL DISP. WASH. D.C. Name JOHNSON, Lyndon Baines Rank Lt. Cdr., I-V(S) Corps USNR. Place of birth Texas Date of birth Aug. 27, 1908 Family history Mother lifting and well, father died 60 heart disease. History of illness or injury General health good., Pneumonia June 1942. Head and face Normal Eyes: Pupils (size, shape, reaction to light and distance, etc.) Regular react to L. A. Distant vision Rt. 16 /20, corrected to 20 /20 by Glasses Lt. 16 /20, corrected to 20 /20 by Glasses Lt. 16 /20, corrected to 20 /20 by Glasses Binocular vision 16/20 Color perception Normal 19th Edition. (Without tenses—Recorded only when visual defects exist) Disease or anatomical defects None Ears: Hearing Rt. Watch /40" Coin click /20' Whispered voice 15 /15' Spoken voice 15 /15 Binaval /15'. Disease or defects None
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Lt. Watch/40" Coin click/20' Whispered voice
Binaural/15'. Disease or defects None
Difficultian 15. Disease of defects
(Spoken voice)
Nose Deviation of septum to left. (Disease or anatomical defect, obstruction, etc. State degree)
Sinuses Normal
Tongue, palate, pharynx, larynx, tonsils Normal
Teeth and gums (disease or anatomical defect): Noted below:
Missing teeth 16-19-92 (List numbers) Mark missing teeth by X whether replaced or not. Show size and position of garies in black use yed to indicate fillings and restorations.
Nonvital teeth
Periapical disease
Marked malocclusion no Degree)
(Yes or no)
(Yes or no)
Pyorrhea alveolaris
Teeth replaced by bridges
Meets dental requirements Yes (Yes or no) (Yes or no)
Dentures no W.D. BRYAN, Lt. Cdr., DC, USN.
General build and appearance neavy.
Temperature 98 Chest at expiration
Height 74 Chest at inspiration 37
Weight 189 Circumference of abdomen at umbilicus 33
Weight 189 Circumference of abdomen at umbilicus 33 Recent gain or loss, amount and cause 10 lbs past few months.pneumonia.
Recent gain or loss, amount and cause 10 lbs past few months pneumonia. Skin, hair, and glands None
Recent gain or loss, amount and cause 10 lbs past few months.pneumonia.

Thorax (size, shape, movement, rib cage, mediast	inum)Normal
	etc. Clear bo p & n
209 <u></u>	SOLUTION OF THE PROPERTY OF TH
Cardio-vascular system Normal	Nove 2
Heart (note all signs of cardiac involve	ement) Normal
Pulse: Before exercise 100	Blood pressure: Before, S 120 , D 80
After exercise 124	(35 - 1 64) 36 3 3 3
Three minutes after 9	0
	Character of pulse Normal
Condition of veins Normal	Hemorrhoids None
Abdomen and pelvis (condition of wall, scars, he	rniae, abnormality of viscera)
VLower R. Rectus scar-no masses	s or tender areas.
Genito-urinary system Normal	TOTAL
Urinalysis: Sp. gr, alb.	, microscopical
The second secon	(Organic or functional disorders)
Romberg neg.	Incoordination (gait, speech)
	p (knee, ankle, elbow) active Tremors nslight
	required.
	nia, depression, instability, worries) <u>none</u>
Aban Description of goods to	the second second abstraction a specific despect
Blesantal 757, Direct	a or defects Home
Smallpox vaccination Date last vaccination	Typhoid prophylaxis
(Reaction	Date of last course 1942
Remarks on abnormalities not otherwise noted or	sufficiently described above None
The state of the s	10 US
Summary of defects Deviated septum to 1	eft.
Is the individual fit to perform active duty at sea	or on foreign service? (If not, state limit of duty) Yes.
	Training on Descript value for the A.
Findings and recommendations (as per Courts an	
rom active duty. This duty has no	t been adversely affected by this duty.
CARTIFIED A TRUE EXAMINATION.	J. TROXELL, Commander, MC, USN.
M Mand more	A. H. J. Lieut Comdr, MC-V(S), USNR.
	A. J. WEAVER, Lieut.MC-V(S), USNR.
Remarks or endorsement	TIMEST, ENGINE DISC DO DOGES & SAUGE.
	Description and the service and
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INSTRUCTIONS: Be definite in statement and specific in recommendation. All abnormal conditions shall be given diagnostic titles as listed in Navy Nomenclature. The original only shall be forwarded direct to the Bureau of Medicine and Surgery except in cases of personnel of the Naval Reserve when the original and one copy shall be forwarded via the Commandant. Regarding preliminary examinations for the Naval Academy, see paragraph 1403, and cases of defective hearing. In recording vision, the numerator of the fraction shall be the distance at which Snellen's 20-foot test letters can be determined and the denominator, 20.

16-11240

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MEDICAL HISTORY

(CONTINUED)

MEDICAL .	HISTORY	STATE NAME OF PLACE—DATE EACH NEW ENTRY
URNAME		
JOHNSON		
HRISTIAN NAME(S)		
Lyndon Baines		
ANK OR RATE	FILE OR SERVICE No.	
LCDR USNR	086243	
IRTHPLACE	BIRTH DATE	
Texas		
	8-27-08	
STATE NAME OF PLACE—		
Headquarters, Potoma Command,		
U.S. Naval Gun Facto		
Washington 25, D.C.		
		Way 1
* Physical examinat	ion for promotion	Mark 1 MDES and a series
to Commander, USNR c		
Bethesda, Maryland o		*
Defects noted:	n 20 September 1747.	
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Maryland.	1	is teacherds, theretand on 20 september 1949
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	H. LINDER	
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		Constitution
		Headquarters, Polonic Giver Meral

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		☆ GPQ 16—44889-1

BUREAU OF MEDICINE AND SURGERY NAVY DEPARTMENT

Date 3-9-49

To:	BuPers	BuPers or ComdtMarCorps									
Subj:	PULHES - classification in the case of JOHNSON, Lyndon B., 86243										
1.											
	P	U	L	Н	E	S					
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2.	Where t			s belo	w two	(2) giv	ve diag	gnosis	followe	d by R or T	
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By direction of the Chief, BuMed:

C. R. BALL Captain (MC) USN

MEDICAL HISTORY

Page 1
Surname JOHNSON AMARIAN
Christian name(s) Lyndon Baines
STATE NAME OF PLACE DATE EACH NEW ENTRY
Reserve Armory, Ny.Yd. Wash.D.C.
Examined 5-21-49 and found physically
qualified for appointment as Lt-C. 1-V
(S) USNR.
C. W. SMITH
Commander (MC) USN. (retired)
President Board of Medical Examiners.

16-9917

Form

(5,9)

MEDICAL HISTORY

Page
Surname MOCNHOT
Christian name(s) Rented gobay 1
STATE NAME OF PLACE DATE EACH NEW ENTRY
Reserve Amory, Ny. Và. Weshan.c.
Examined 5-21-40 and found physically
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(s) unp.
HPIME .W.O
Commander (MC) USW. (retired)
President Poerd of Meddeel Examiners.
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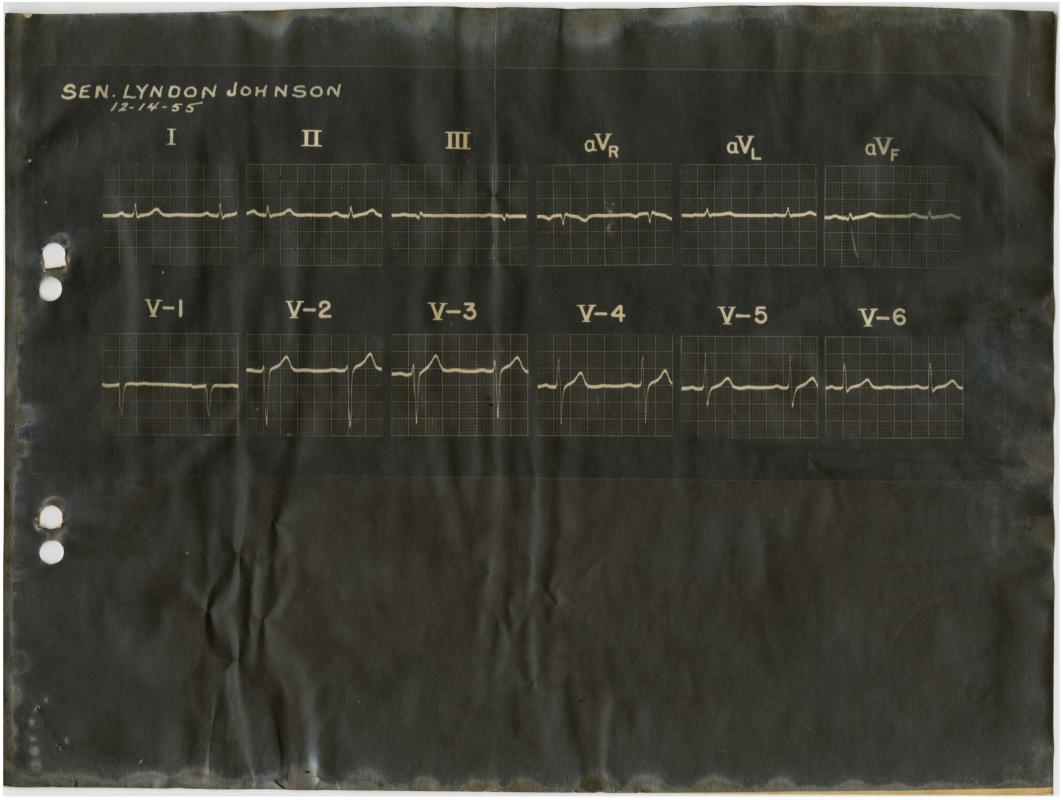
16-9917

HEALTH RECORD			CHRONOLOGICAL RECORD OF MEDICAL CARE								
	DATE		SYMPTOMS, D	DIAGNOSIS, TREATME	ENT, TREATING ORGANIZ	ZATION (Sign each entry)					
23 A	pr 54	Headquarters, PRNC, USNGF, Washington 25, D. C.									
		BUPERS 1tr PERS-B113a/RWB/mjz 86243/1635 of 20 Apr 1954									
		assign	nes a phy	sical risk cl	lassification or	f 'C' and waives the					
		below defects in the event subject officer is ordered to active duty:									
		(a) h	ronchial	stenosis							
		(b) r	rephrolit								
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SEX	RACE GR	RADE, RATING	, OR POSITION	ORGANIZATION UNIT	COMPONENT OR BRANCH	SERVICE, DEPT. OR AGENCY					
M	CAUC NT'S LAST N	CI AME—FIRST N	OR HAME-MIDDLE N	PRNC	DATE OF BIRTH (DAY-MONTH-Y	USNR-R EAR) IDENTIFICATION NO.					
JO	HNSON,	Lyndor	Baines	INDRODIS, INCATME	8-27-08	86243					

standard Form 696 completed Nov. 1933 By Buran of the Budget Chemist A.—52 U. S. GOVERNMENT PRINTING OFFICE 16-67728-1

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)								
TOUNGON	ME-PIRST NAME-MIDDLE NAME DATE OF BUSTN (DAY-MOSTN-YEAR) IDENTIFICATION NO.								
M CAUG	CDR PRNC USNR-R								
EX RACE GR	ADE, RATING, OR POSITION ORGANIZATION UNIT COMPONENT OR BRANCH SERVICE, DEPT. OR AGENCY								
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	WOHC USN								
	MONG Hair								
	J. E. MACKLIN								
	a. & Maskellian								
	(n) mehurottourgere								
	(b) nephrolithiasis								
	(a) bronchial stenosis								
	duty:								
	below defects in the event subject officer is ordered to active								
	assignes a physical risk classification of 'C' and weives the								
	BUPERS ltr PERS-Bill3a/RWB/mjz 86243/1635 of 20 Apr 1954								
3 Apr 54	Headquarters, PRNC, USNGF, Washington 25, D. C.								
DVIE	BYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)"								
HEALTH R									

CHROHOLOGICAL RECORD OF MEDICAL CARE



12-14-55 The present tracing shows no definite abnormality.

The previous tracings (July thru August 1955) showed posterior myocardial into

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(119)

CARDIAC CONSULTATION

SENATOR LYNDON B. JOHNSON

December 14, 1955

Five and a half months have now elapsed since Senator Johnson had a myocardial infarction. He has been active for the last two months. He has participated in a number of meetings, has flown considerable distances, and recently has walked a great deal. He has hunted deer on several occasions. He has the following complaints.

- 1. Fatigue. He notes unpleasant fatigue after approximately five hours and at that time seeks to be alone in order to rest. This fatigue is relieved considerably by a short nap and/or massage.
- 2. Precordial pulling sensation. He complains of a precordial pulling sensation that from time to time bothers him considerably. This pulling sensation is not routinely produced by effort. However he has noted this feeling occasionally while walking up a hill near his home, and particularly has noticed this sensation near the left nipple when he becomes irritated, anxious, frustrated, or tired. He cannot clearly state how long the discomfort lasts but has noted that it may come and go over a period of hours. The discomfort is relieved by alcohol or a short nap.
- Breathlessness. He complains of some shortness of breath, particularly when he is in a crowded room. He has observed this when he is in a closed-in area such as an automobile. He notices this sensation frequently when the room is too hot and occasionally seeks relief by walking outside in the open. He feels as though his lungs are not being filled with air and frequently sighs. He has had no shortness of breath on effort. The dyspnea routinely occurs at the same time as the pulling sensation described above. Senator Johnson occasionally inhales oxygen and feels that this offers him some benefit. From his history it is doubtful if this maneuver is needed.

Senator Johnson has had no edema, no ectopic beats, no paroxysmal rapid heart action and no syncope. He complains of constipation and has been unable to eliminate mineral oil as a laxative. He has some difficulty in urinating. (This will be checked more thoroughly in the near future.) He is having much less cough and wheeze since he has discontinued smoking. He has been able to maintain his weight at approximately 177 pounds. He has now learned to omit many of the high-calorie foods without great difficulty.

Senator Johnson has been on .25 mgm. Digoxin daily, Peritrate, and Hexavitamins. He has tried phenobarbital for rest but this has not been too useful.



Cardiac Consultation Senator Lyndon B. Johnson December 14, 1955

Page 2

PHYSICAL EXAMINATION

General appearance is good. He has much less subcutaneous fat than formerly. His weight is 177 pounds. Blood pressure is 120/70 in the right arm. The peripheral vessels are easily palpable. On funduscopic examination the optic discs are normal and there are no hemorrhages or exudates. The retinal arterioles are slightly tortuous and show an increase in the light reflex and slight arterio-venous compression. Rales are heard in the lower lung fields but these disappear after coughing. No wheezing is heard. No edema is noted. On physical exam the heart is not definitely enlarged. A2 is louder than P2. There is a Grade I systolic murmur heard at the apex. There are no gallop sounds. The neck veins are normal. The physical examination of the abdomen is not remarkable except that the liver is palpable two fingersbreadth below the right costal margin. (This was noted previously.) Palmar erythema is noted.

The electrocardiogram has returned to normal. (See enclosed electrocardiogram.) There is a small Q wave in Lead 3 and an extremely small Q wave in Lead AVF. (These Q waves would undoubtedly be called within normal limits when the history was not known.) Previous electrocardiogram showed typical posterior myocardial infarction.

On fluoroscopic examination the heart appears to be of normal size. (The first impression in looking at the six-foot chest film is that the heart is slightly enlarged. However the heart is within normal limits in size when measured with a ruler and compared to the interthoracic width.)

OPINION

- 1. Coronary atherosclerosis with history and electrocardiographic evidence of posterior myocardial infarction on July 2, 1955.
- Most of the precordial discomfort is related to nervous tension. However I believe that he occasionally has angina pectoris produced by anger, frustration, and anxiety, but not by effort.

3. History of renal stones, diverticulosis, bronchial stenosis, and degenerated lumbar disc.



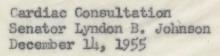
Cardiac Consultation Senator Lyndon B. Johnson December 14, 1955

SUGGESTIONS FOR TREATMENT OF SENATOR LYNDON B. JOHNSON

(These suggestions will be altered by Drs. Cain and Burchell of the Mayo Clinic, Dr. Gifford at the U. S. Capitol, and Dr. Whaley of Johnson City, Texas, as they see fit.)

- 1. Continue the Digoxin, .25 mgm. daily, Peritrate, and Hexavitamins.

 (Some of these medications may be altered after Senator Johnson returns to Washington where he can be observed frequently.)
- 2. Since Senator Johnson works under considerable pressure it would be worth noting the effect of drugs such as Serpasil or Equanil. These drugs should not be tried until he can be observed daily by Dr. Gifford in Washington. The tendency of Serpasil to cause slight diarrhea might be of some benefit also.
- 3. Most of the precordial discomfort is due to nervous tension. However it is desirable to study the effect of nitroglycerin on this sensation. He has been instructed to use 1/200th grain of nitroglycerin under the tongue and to note the presence or absence of relief. If 1/200th grain of nitroglycerin produces too much pounding in the head, then 1/400th grain should be used. Senator Johnson understands that nitroglycerin should produce prompt relief and that I would not encourage its use for sensations that are clearly not due to angina. It will probably take some time to separate the discomforts that he experiences. If it becomes quite clear that none of the discomfort is angina pectoris, then of course nitroglycerin should not be used. This will also require some more observation.
- 4. He is to maintain his weight at approximately 175 to 185 pounds.
- 5. I have the following suggestions to make regarding the organization of his future work.
 - A. Facilities should be available for him to rest when he is fatigued. Fatigue usually occurs after about five hours.
 - B. Since much of his difficulty is produced by irritating situations it is obvious that uncomplimentary letters and poor press releases should be withheld whenever possible. This is his own suggestion. He has also expressed the hope that he would not be forced to come into contact with unpleasant and unnecessary visitors.
 - C. Apparently it will be satisfactory for him to arrive at the Capitol at approximately 10:00 to 10:30 a.m. It would be a good plan to have lunch in the office and have facilities for rest and an occasional massage, which apparently relieves him a great deal. He could then complete the day as soon as possible and should be home by 7:30 to 8:00 p.m. Since the interval of time between lunch and dinner is great, I would suggest a small amount of food at approximately 5:00 p.m.



(Suggestions for Treatment - continued)

- D. His social activities should be kept at a minimum and he should not go out more than one night per week.
- E. I suggest that he take a short vacation every three to four months.

J. Willis Hurst, M.D.