

DATE: 11-14-2017

JFK Assassination System  
Identification Form

Date: 5/27/201

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Agency Information

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Document Information

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JAMES P. HOSTY JR.  
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193-10494

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT 6' 11 1/2"		52. WEIGHT 228 lbs		53. COLOR HAIR Black		54. COLOR EYES Brown		55. BUILD: SLENDER <input type="checkbox"/> MEDIUM <input type="checkbox"/> HEAVY <input checked="" type="checkbox"/> OBESE <input type="checkbox"/>		56. TEMP. 98.4°							
57. BLOOD PRESSURE (Arm at heart level)						58. PULSE (Arm at heart level)											
SITTING SYS. 130 DIAS. 70		RECUM-BENT SYS. 125 DIAS. 70		STANDING (3 min.) SYS. 134 DIAS. 70		SITTING 64		AFTER EXERCISE 100		2 MIN. AFTER 64							
59. DISTANT VISION		60. REFRACTION		61. NEAR VISION		CORR. TO		BY		BY							
RIGHT 20/20		CORR. TO 20/20		BY S. CX		CORR. TO		BY		BY							
LEFT 20/20		CORR. TO 20/20		BY S. CX		CORR. TO		BY		BY							
62. HETEROPHORIA: (Specify distance) ES°																	
63. ACCOMMODATION																	
RIGHT OK				LEFT OK				64. COLOR VISION (Test used and result)				65. DEPTH PERCEPTION (Test used and score)					
RIGHT OK				LEFT OK				UNCORRECTED				CORRECTED					
66. FIELD OF VISION						68. RED LENS						69. INTRAOCULAR TENSION					
none						none						none					
70. HEARING		71. AUDIOMETER								72. PSYCHOLOGICAL AND PSYCHOMOTOR (Tests used and score)							
RIGHT WV N /15 SV 15 /15		LEFT WV N /15 SV N /15		250 250		500 500		1000 1000		2000 2000		3000 3000		4000 4000		8000 8000	
RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT		RIGHT		LEFT		RIGHT	

REC'D PERSONNEL UNIT  
JAN 4 8 23 AM '57  
U.S. DEPT. OF JUSTICE

73. NOTES (Continued) AND SIGNIFICANT OR INTERVAL HISTORY

none

(Use additional sheets of plain paper if necessary)

74. SUMMARY OF DEFECTS AND DIAGNOSES (List diagnoses with item numbers)

Atrophy of testicles

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (Specify)

none

77. EXAMINEE (Check)

IS QUALIFIED FOR regular duty  
 IS NOT

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

76. PHYSICAL PROFILE

P	U	L	H	E	S
PHYSICAL CATEGORY					
A	B	C	E		

79. TYPED OR PRINTED NAME OF PHYSICIAN

WENDELL L SPALDING M.D.

SIGNATURE

Wendell L Spalding MD.

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (Indicate which)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS